

NEONATAL

FLUCONAZOLE

This document should be read in conjunction with this **DISCLAIMER**

Restricted: Requires Neonatologist or Microbiologist review within 24 hours of initiation

Presentation	Vial: 200mg/100mL = 2mg/mL		
	Oral suspension: 50mg/5mL= 10mg/mL		
Classification	Azole antifungal		
Indication	Treatment of systemic candida infections		
	Prophylaxis against candida colonisation in very low birthweight infants		
	Treatment of oral candidiasis if inadequate response to topical antifungals		
Contraindications	Known hypersensitivity to fluconazole or related azole antifungal or any excipient of the product		
	Fluconazole should not be used in combination with other drugs that prolong the QT interval AND are metabolised by CYP3A4 – contact pharmacy for further information		
	Caution in patients with hepatic impairment due to the risk of serious liver toxicity.		
Dose	Treatment - Systemic infections		
	Oral/IV:		
	Consider a loading dose	25mg/kg/dose	
	(where appropriate)		
	Maintenance dose	12mg/kg/dose daily	
		Duration is dependent on clinical situation - Consult microbiology	
	Prophylaxis Prophylaxis		
	Oral/IV:		
	Dose	6mg/kg/dose TWICE Weekly	

Fluconazole - Neonatal

	Oral Candidiasis (If inadequate re	esponse to topical antifungals)
	Oral:	
	Dose	3mg/kg/dose daily for 7 days
Dose Adjustment	Dose reduction is recommended in patients with renal impairment. Consult Microbiology	
Monitoring	Liver function (AST, ALT, alkaline phosphates), renal function tests, serum potassium, CBC, platelets for long term use	
Guidelines & Resources	WNHS Policy: Antimicrobial Stewardship	
Compatible Fluids	Use undiluted Glucose 5%, Sodium chloride 0.9%	
Preparation	IV: Available from CIVAS (KEMH & PCH) Use undiluted	
	Oral: Reconstitution: Add 24mL of War suspension in the bottle. Shake we Concentration is 50mg/5mL = 10m Discard any remaining suspension	ell. ng/mL
Administration	IV Infusion: Infuse over 1 to 2 hours Infuse doses greater than 6mg/kg over 2 hours Maximum rate: 200mg/hour Oral: May be given at any time with regard to feeds	
Adverse Reactions	Common: rash, headache, dizzin pain, diarrhoea, reversible elevate Rare: oliguria, hypokalaemia, dizz syndrome; prolonged QT interval, rare)	d liver enzymes iness, seizures, Stevens-Johnson
Storage	Vial: Store at room temperature -	
	Fowder for reconstitution: Store	at room temperature - below 25°C

	Reconstituted suspension: Refrigerate - do not freeze
	Discard 14 days after reconstitution
Interactions	Fluconazole has been shown to prolong the QT interval; it should be used with caution in combination with other drugs that may also prolong the QT interval due to the increased risk of arrhythmias Alters metabolism of phenytoin, barbiturates, caffeine, midazolam. Monitor levels of these drugs if used concomitantly for long periods.
Notes	100mL of fluconazole contains 15mmol of sodium
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Standards Applicable:	NSQHS Standards:
	1 Governance
	3 Infection Control
	4 Medication Safety;
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