



ADULT Medication Monograph

# ERYTHROMYCIN

This document should be read in conjunction with this [DISCLAIMER](#)

**Antimicrobial Restriction – Restricted (IV)**

For antimicrobial use Pre-approval required by ID physician or Clinical Microbiologist

**Antimicrobial Restriction – Monitored (IV for prokinesis)**




IV therapy beyond 3 days to be discussed with ID physician or Clinical Microbiologist

**Antimicrobial Restriction – Unrestricted (Oral)**

<b>Class</b>	Macrolide antibiotic
<b>Presentation</b>	<b>Vial (Powder for reconstitution):</b> 1g <b>Capsule:</b> 250mg <b>Oral suspension:</b> 400mg/5mL
<b>Storage</b>	Store at room temperature, below 25°C
<b>Dose</b>	<b><u>Preterm Prelabour Rupture of Membranes (PPROM):</u></b> <b>Oral:</b> 250mg 6 hourly for 10 days  <b><u>Prokinesis (Non antimicrobial use):</u></b> <b>IV:</b> Dose: 50-100mg 6 hourly, if higher doses are necessary, approval from the patients' consultant is required. Maximum dose for prokinesis 500mg IV 6 hourly  <b><u>Infections due to susceptible organisms:</u></b> <b>IV:</b> 500 - 1000mg 6 hourly Not usually encouraged due to availability of more efficacious and safer IV agents e.g. azithromycin.
<b>Administration</b>	<b><u>Oral:</u></b> To be taken at least half an hour before food  <b><u>IV Infusion:</u></b> <b><i>Step 1 Reconstitution:</i></b> Reconstitute 1g with 20mL of water for

	<p>injections</p> <p><b>Step 2 Dilution:</b> Dilute to a maximum concentration of 5mg/mL with sodium chloride 0.9%. i.e. for a 1 g dose, dilute in 200 mL of fluid</p> <p><b>Step 3 Administration:</b> Infuse over 1 to 2 hours</p>
<b>Pregnancy</b>	<p><b>1<sup>st</sup> Trimester:</b> Consider alternative*</p> <p><b>2<sup>nd</sup> Trimester:</b> Safe to use</p> <p><b>3<sup>rd</sup> Trimester:</b> Safe to use</p> <p>* Initial studies of erythromycin use in early pregnancy showed an association with cardiac malformations when compared to infants not exposed to the medicine. Recent studies have not found an association between in utero exposure and an increased incidence of malformations.</p> <p>There is also insufficient evidence to support a possible increased risk of pyloric stenosis in newborns exposed to erythromycin during pregnancy</p> <p>For more information, please contact <a href="#">KEMH Obstetric Medicines Information Service</a>.</p>
<b>Breastfeeding</b>	Safe to use
<b>Monitoring</b>	<p>Erythromycin may prolong the QT interval and increase the risk of arrhythmia (risk is greater with the IV route)</p> <p>Treatment with <a href="#">drugs that inhibit CYP3A4</a> may increase erythromycin concentration and the risk of QT prolongation; avoid combinations if possible.</p>
<b>Clinical Guidelines and Policies</b>	<p><b>HDWA Policies:</b></p> <p><a href="#">WA Adult Medicines Formulary</a></p> <p><b>WNHS Policies:</b></p> <p><a href="#">Antimicrobial Stewardship</a></p> <p><b>KEMH Clinical Guidelines:</b></p> <p><a href="#">Rupture of Membranes- spontaneous</a></p> <p><b>KEMH Pharmaceutical &amp; Medicines Management Guidelines:</b></p> <p><a href="#">Medication Administration</a></p>
<b>References</b>	<p>Australian Medicines Handbook. Erythromycin. In: Australian Medicines Handbook [Internet]. Adelaide (South Australia): Australian Medicines Handbook; 2020 [cited 2020 Dec 01]. Available from: <a href="https://amhonline.amh.net.au/">https://amhonline.amh.net.au/</a></p> <p>The Royal Women's Hospital. Erythromycin. In: Pregnancy and Breastfeeding Medicines Guide [Internet]. Parkville (Victoria): The Royal Women's Hospital; 2020 [cited 2020 Dec 01]. Available from: <a href="https://thewomenspbmg.org.au/">https://thewomenspbmg.org.au/</a></p>

	<p>Society of Hospital Pharmacists of Australia. Erythromycin In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2020[cited 2020 Dec 01]. Available from: <a href="http://aidh.hcn.com.au">http://aidh.hcn.com.au</a></p> <p>EUSOM13: Gastroparesis in adults: oral erythromycin. NICE, June 2013.</p>
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Keywords:	Erythromycin, E-mycin, PPRM, rupture of membranes		
Publishing:	<input checked="" type="checkbox"/> Intranet <input checked="" type="checkbox"/> Internet		
Document owner:	Chief Pharmacist		
Author / Reviewer:	Pharmacy Department		
Date first issued:	May 2015	Version:	4.0
Last reviewed:	July 2017, Dec 2020	Next review date:	Dec 2023
Endorsed by:	Medicines and Therapeutics Committee	Date:	Dec 2020
Standards Applicable:	NSQHS Standards: 1  Governance, 3  Infection Control, 4  Medication Safety		
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