

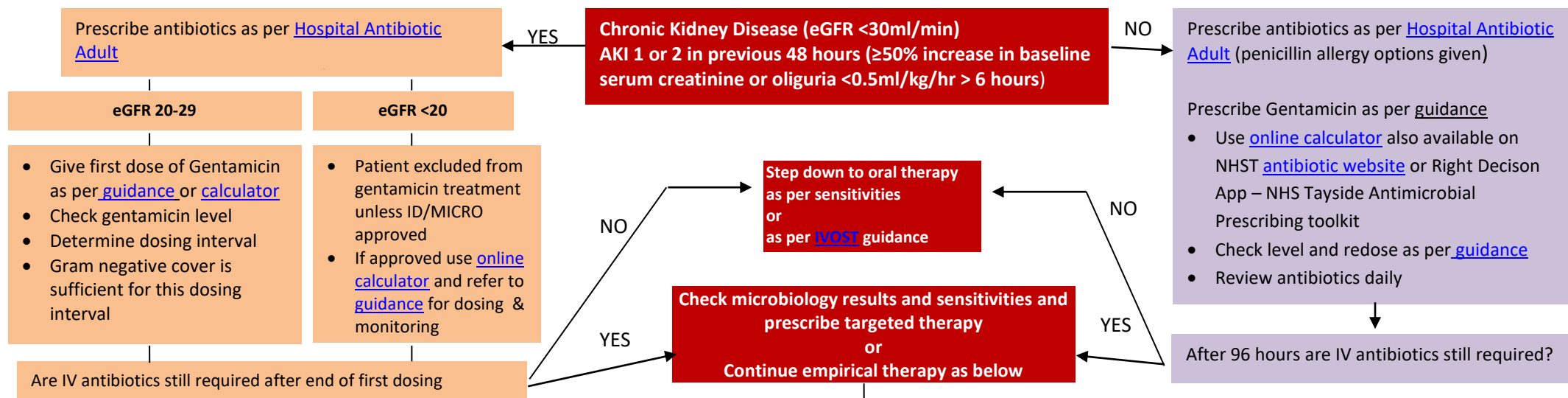
GUIDANCE ON THE USE OF AZTREONAM in ADULTS

Key Points about Aztreonam:

- Does **NOT** provide the same level of antibacterial cover as Gentamicin
- Provides only gram negative bacilli cover
- Does **NOT** provide anaerobic or gram positive cover
- Does **NOT** provide cover for ESBL producing gram negative bacteria

Indications for Aztreonam:

- As an alternative to gentamicin for patients with reduced renal function or patients who have had 96 hours of gentamicin and still require IV therapy – see flow chart below
- Follow separate guidance documents for [Cystic Fibrosis](#), [Pregnancy](#), [Neutropenic Sepsis](#), [Endocarditis](#), [Surgical Prophylaxis](#), Renal Unit Inpatients or patients on dialysis



Severe Systemic Infection	Antibiotics	Penicillin allergy *History of anaphylaxis or angioedema with penicillin replace Aztreonam with Ciprofloxacin	Oral Step Down (or as per sensitivities)
Intrabdominal Sepsis/ Sepsis Unknown Source	IV Amoxicillin/Metronidazole (<i>only use IV if oral route not available</i>) /Aztreonam (add Flucloxacillin if staphylococcal infection suspected)	IV Vancomycin/Metronidazole (<i>only use IV if oral route not available</i>) /*Aztreonam	PO Co-trimoxazole + Metronidazole
Complicated UTI/ Urosepsis/ Pyelonephritis	IV Amoxicillin/Aztreonam	IV Vancomycin/*Aztreonam	PO Co-trimoxazole
Aspiration Pneumonia	IV Amoxicillin/Aztreonam	IV/PO Co-trimoxazole	PO Co-trimoxazole
Hospital Acquired Pneumonia	IV Amoxicillin/Aztreonam	IV/PO Co-trimoxazole	PO Co-trimoxazole

AZTREONAM DOSING: use cockroft gault for patients at extremes of weight as eGFR is normalised to a BSA of 1.73m²
REMEMBER LAST GENTAMICIN DOSE PROVIDES GRAM NEGATIVE COVER UNTIL END OF DOSING INTERVAL as read from nomogram i.e. 24, 36 or 48 hours. PRESCRIBE AZTREONAM TO START AT THE END OF THAT INTERVAL.

eGFR ≥30 2g tds
eGFR <30 but >10 2g loading dose then 1g tds
eGFR ≤10 2g loading dose then 500mg tds

CO-TRIMOXAZOLE DOSING:

Standard dose 960mg bd
eGFR <30 and >15 480mg bd
if eGFR ≤15: alternatives options but beware of ↑CDI risk

- co-amoxiclav (no additional metronidazole required)
- ciprofloxacin (if penicillin allergic)