

Antibiotic Prophylaxis for Suspected Variceal Bleeding in Patients with Liver Cirrhosis

Bacterial infections occur in about 20% of patients with cirrhosis with upper gastrointestinal bleeding within 48 hours of admission; another 50% will have an infection during their hospital stay. Antibiotic prophylaxis reduces the risk of infection and mortality in this patient group.

- Co-trimoxazole 960mg BD for 5 days
- Use IV while NBM and convert to oral when able
- If CrCl <30ml/min reduce dose to 480mg BD
- If co-trimoxazole is contraindicated: ciprofloxacin 500mg OD, if CrCl < 20ml/min reduce dose to 250mg OD (please note the MHRA fluoroquinolone warnings Jan 2024 FQ Warnings AMG key points.pdf (scot.nhs.uk) and ensure patients are counselled and provided with MHRA patient information leaflet)

Agreed by: Gastroenterology Team/Antimicrobial Management Group Date: June 16 Updated: Mar 2025 Review Date: Mar 2028