

Alternative Antifungal Options for Shortage of IV VORICONAZOLE

Notes:

- Check if ORAL voriconazole is available prior to considering alternative IV therapies
- ALL patients on systemic IV antifungals should be discussed with ID or Microbiology
- Always check for interactions in SPC or consult pharmacist or specialist websites
 - [antifungalinteractions](#) or [Stockley's Drug Interactions](#)

| Guidance | Indication for IV Voriconazole | Alternative if no IV Voriconazole available |
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| INVASIVE FUNGAL INFECTIONS (Non Haematology/ Oncology patients) | INVASIVE ASPERGILLOSIS (IA) or SUBACUTE INVASIVE ASPERGILLOSIS (SAIA) Azole antifungals are treatment of choice for this indication and superior to Amphotericin B (Ambisome) and Echinocandins. | OPTION 1: For all patients: consider prompt oral switch if patient clinically responding, able to tolerate and absorb oral medication. Bioavailability of oral voriconazole is 96%. OPTION 2: <ul style="list-style-type: none"> • Discuss with pharmacy if any stock of unlicensed IV voriconazole available OPTION 3: <ul style="list-style-type: none"> • Consider switch to IV ISAVUCONAZOLE 200mg TDS for 2 days then 200mg daily <ul style="list-style-type: none"> ○ Check for interactions (may differ from voriconazole) ○ Can shorten QT - opposite to other azoles which prolong QT interval ○ TDM not routinely recommended – discuss with ID/Antimicrobial Pharmacy Team OPTION 4: <ul style="list-style-type: none"> • If IV ISAVUCONAZOLE not appropriate or tolerated - consider IV Amphotericin B liposomal (AMBISOME or Tillomed brand) – must be prescribed by full generic name and brand name/supplier |
| HAEMATOLOGY ANTIFUNGAL GUIDANCE | PROVEN/PROBABLE/POSSIBLE INVASIVE FUNGAL INFECTIONS | |