Weekly Safety Message from the Chief Medical Officer and Chief Nursing Officer.



Weekly Safety Message 255

Prescription of Co-trimoxazole

<u>Antibiotic guidelines</u> for hospital acquired pneumonia (HAP) have been updated. Co-trimoxazole is now the only empiric treatment option for patients with a penicillin allergy and severe HAP. Co-trimoxazole is also an empiric option in other guidelines.

Co-trimoxazole has been associated with cases of hospitalisation and sudden death due to hyperkalaemia. This risk is higher in elderly patients, those on drugs (which may also cause hyperkalaemia), and people with renal impairment.

Co-trimoxazole should not be administered to people who are pregnant or breastfeeding before discussion with Microbiology/Infectious Diseases.

Action points

- Carry out a complete drug interaction check prior to prescribing co-trimoxazole and review drugs which may cause hyperkalaemia.
- If co-trimoxazole is not suitable for a patient due to contraindications or interactions, speak to Microbiology/Infectious Diseases for alternative treatment options.
- Monitor potassium levels, Full Blood Count, Liver Function
 Tests, and renal function regularly during treatment.
- Discontinue co-trimoxazole immediately if blood disorders such as thrombocytopenia are identified, a rash develops, or the patient shows symptoms of Acute Respiratory Distress Syndrome (ARDs).
- Co-trimoxazole has excellent oral bioavailability. Prescribe for oral administration unless the patient has poor oral absorption, has no enteral access, or oral therapy is not recommended by Trust guidelines.
- Consider if your patient is eligible for penicillin allergy de-labelling.

This is a summary. For more information on prescribing co-trimoxazole, please see the BNF or the Summary of Product Characteristics.

Date: 19th December 2023