### **MONOGRAPH**

# **Amoxicillin / Clavulanic Acid Monograph - Paediatric**

Scope (Staff):	Medical, Pharmacy, Nursing
Scope (Area):	All Clinical Areas

# **Child Safe Organisation Statement of Commitment**

CAHS commits to being a child safe organisation by applying the National Principles for Child Safe Organisations. This is a commitment to a strong culture supported by robust policies and procedures to reduce the likelihood of harm to children and young people.

# This document should be read in conjunction with this **DISCLAIMER**

QUICKLINKS					
Dosage/Dosage	Administration	Compatibility	<u>Monitoring</u>		
<u>Adjustments</u>					

### **DRUG CLASS**

Amoxicillin is a penicillin antibiotic with clavulanic acid, a beta-lactamase inhibitor. (1)

# **INDICATIONS AND RESTRICTIONS**

Amoxicillin with clavulanic acid should be reserved for infections due to bacteria that produce beta-lactamase enzymes including some strains of *Escherichia coli*, *Haemophilus influenzae* and *Klebsiella* species. It has good anaerobic cover. (2)

# Oral: Unrestricted (green) antibiotic

This is not a restricted agent. Follow standard ChAMP guidelines where appropriate.

### IV: Monitored (orange) antibiotic

- If the use is consistent with a standard approved indication, this must be communicated to ChAMP by documenting that indication on all prescriptions (inpatient and outpatient).
- The ChAMP team will review if ongoing therapy is required and/or if the order does not meet <u>ChAMP Standard Indications</u>
- If use is not for a standard approved indication, phone approval must be obtained from ChAMP before prescribing.

# **CONTRAINDICATIONS**

- Hypersensitivity to amoxicillin, clavulanic acid or any component of the formulation or in patients with a history of high risk allergy to penicillins.<sup>(1, 3-5)</sup>
- Contraindicated in patients with a history of cholestatic jaundice or hepatic dysfunction with amoxicillin/clavulanate potassium therapy. (1)
- Patients with phenylketonuria note that the suspension formulations contain aspartame.

### **PRECAUTIONS**

- Amoxicillin with clavulanic acid may be prescribed in selected patients with high risk allergy to another Beta-lactam sub-class (e.g. some cephalosporins, carbapenems) in discussion with immunology. (1, 5)
- In patients with a previous <u>low risk reaction</u> to amoxicillin or another penicillin (delayed rash [>1hr after initial exposure] without mucosal or systemic involvement) the risk of subsequent reaction is low. Re-challenge may be acceptable in discussion with immunology. (1, 5)
- Amoxicillin with clavulanic acid is associated with a higher incidence of rash when used in patients with infectious mononucleosis, acute lymphoblastic leukaemia, chronic lymphocytic leukaemia and HIV infection.<sup>(1)</sup>
- The IV preparation contains 39mg of potassium and 63mg of sodium per 1gram of amoxicillin. (1, 5)

# **FORMULATIONS**

Listed below are products available at PCH, other formulations may be available, check with pharmacy if required:

### Oral:

- Amoxicillin 875mg with clavulanic acid 125mg (Duo Forte<sup>®</sup>)
- Amoxicillin 400mg with clavulanic acid 57mg per 5mL oral powder for suspension (Duo 400<sup>®</sup>)

### IV:

Amoxicillin 1000mg with clavulanic acid 200mg per vial.

Imprest location: Formulary One

### **DOSAGE & DOSAGE ADJUSTMENTS**

**Neonates:** Refer to Neonatal Medication Protocols for oral dosing. For IV dosing in premature neonates, please consult Infectious Diseases or Clinical Microbiology.

All doses are expressed and should be prescribed as the amoxicillin component (oral doses refer to the Duo 400<sup>®</sup> and Duo Forte<sup>®</sup> preparations).

# IV: Change to oral route when possible

- Birth (term) to 3 months and <4kg: 25mg/kg/dose 12 hourly<sup>(1)</sup>
- Birth (term) to 3 month and ≥4kg: 25mg/kg/dose 8 hourly<sup>(1)</sup>
- ≥3 months and <40kg: IV 25mg/kg/dose (to a maximum of 1gram) 8 hourly. The dose may be increased to 6 hourly in severe infections. (1)
- ≥40kg: IV 1g every 8 hours; increase to every 6 hours in severe infections. Up to 2g every 6-8 hours can be used.<sup>(1)</sup>

PCH only stocks the 1g/200mg vials of amoxicillin/ clavulanic acid. Where the 2gram amoxicillin component is required, a 1gram dose of amoxicillin with clavulanic acid should be prescribed in combination with a 1gram dose of amoxicillin to give the final 2gram amoxicillin dose which avoids administration of the additional clavulanic acid and its associated adverse effects. (1)

Oral (>4 weeks to 18 years): (Products with amoxicillin component of 400mg/5mL or 875mg per tablet).

**Usual dose:** 25mg/kg/dose (to a maximum of 875mg) twice daily. (6)

Dosing in Overweight and Obese Children: Dose based on measured body weight

# Renal impairment:

eGFR calculator (Google Chrome<sup>®</sup>)

### For Oral Administration:

- Dosage adjustment may be required in cases of impaired renal function (with creatinine clearance of less than 30mL/min) due to the increased risk of crystalluria.
- For patients with a creatinine clearance of less than 30mL/minute, the higher strength preparations (i.e. the 875mg/125mg tablets and 400mg/57mg per 5mL suspension) should be avoided due to the clavulanic acid component and the risk of crystalluria. (7)
- The lower strength preparations (i.e. 500mg/125mg and 125mg/31.25mg per 5 mL suspension) may be suitable.<sup>(7)</sup>
- Contact Pharmacy for further information.

### For IV Administration:

- eGFR ≥30mL/minute use normal dose
- eGFR 10-30mL/minute/1.73m<sup>2</sup> use normal initial dose and then use half normal dose every 12 hours.<sup>(7)</sup>
- eGFR <10mL/minute/1.73m<sup>2</sup> use normal initial dose and then use half normal dose every 24 hours (7)
- Monitor for accumulation of electrolytes (potassium and sodium) contained in the IV preparation.

### **Hepatic impairment:**

- Amoxicillin with clavulanic acid is contraindicated in patients with a history of cholestatic jaundice or hepatic dysfunction associated with its use.<sup>(5, 6)</sup>
- Care should be taken when using amoxicillin with clavulanic acid in patients with hepatic impairment due to other causes, although no specific dose reductions are recommended.<sup>(5, 6)</sup>

# **RECONSTITUTION & ADMINISTRATION**

# Reconstitution - Oral suspension (Duo® 400mg/57mg per 5mL):

- Reconstitute with water as follows: Tap the bottle until all the powder flows freely; add
  approximately half the amount of water as per the manufacturer's instructions for reconstitution
  and shake well to suspend the powder.
- Add the remainder of the water and again shake well. Store the reconstituted suspension between 2°C and 8°C and discard any remaining suspension after 7 days. (5)

### Reconstitution - IV:

- Reconstitute the 1000/200mg vial with 19.1mL of water for injection to give a 50mg/mL solution of amoxicillin component<sup>(3)</sup>
- Powder volume is 0.9mL for the 1gram vial
- Use reconstituted 50mg/mL solution immediately as it is only stable for 20 minutes at room temperature.<sup>(3)</sup>

### Oral administration:

- Amoxicillin with clavulanic acid preparations should be taken immediately before food or with
  the first mouthful of food to minimise gastrointestinal intolerance and to optimise absorption. (1, 4,
  6)
- The suspension should be shaken well prior to measuring dose. (5)

### IV administration:

# IV push (Children > 3 months):

 Doses ≤1gram may be given via a slow IV push over 3 to 4 minutes, at a final concentration of 50mg/mL or weaker. <sup>(3, 5, 6)</sup>

#### IV infusion:

- Dilute the required dose to a final concentration of 10mg/mL or weaker and infuse over 30 minutes.<sup>(3, 5-7)</sup>
- Amoxicillin/ clavulanic acid diluted in sodium chloride 0.9% is stable for 4 hours at 25°C.<sup>(3)</sup>

# **COMPATIBILITY (LIST IS NOT EXHAUSTIVE)**

# Compatible fluids:

- Sodium chloride 0.9%
- Ringer's
- Hartmann's (3, 5)

### Compatible at Y-site:

Compatibilities of IV drugs must be checked when two or more drugs are given concurrently.

### **MONITORING**

Renal, hepatic and haematological function should be monitored weekly with prolonged therapy (i.e. longer than 10 days).<sup>(1, 4)</sup>

# **ADVERSE EFFECTS**

**Common:** pain and inflammation at injection site, diarrhoea, nausea, transient increases in liver enzymes and bilirubin, rash.<sup>(1)</sup>

Infrequent: vomiting, Clostridioides difficile-associated disease. (1)

**Rare:** pustular drug eruption, cholestatic hepatitis (mainly due to clavulanic acid and is usually reversible), black tongue, neurotoxicity (e.g. drowsiness, hallucinations, coma or seizures – usually associated with high doses), bleeding, blood dyscrasias (e.g. neutropenia, thrombocytopenia), electrolyte disturbances.<sup>(1)</sup>

**Immunologic reactions**: include rash, erythema, urticaria, contact dermatitis, fever, anaphylactic shock, angioedema, bronchospasm, interstitial nephritis, haemolytic anaemia, eosinophilia, serum sickness-like syndrome, exfoliative dermatitis, Stevens-Johnson syndrome and toxic epidermal necrolysis.<sup>(1)</sup>

### **STORAGE**

# **Oral preparations:**

- Tablet: Store below 25°C. Protect from moisture and light. (5)
- **Suspension:** Store the un-reconstituted powder below 25°C, after reconstituting, store in the refrigerator between 2°C and 8°C and discard after 7 days. (5)

# IV preparations:

- Vial: store below 25°C. Protect from light. (3, 5)
- Reconstituted solution: stable for 20 minutes at 25°C.<sup>(3)</sup>
- Diluted solution: stable in sodium chloride 0.9% for 4 hours. (3).

### **INTERACTIONS**

This medication may interact with other medications; consult PCH approved references (e.g. Clinical Pharmacology), a clinical pharmacist or PCH Medicines Information Service on extension 63546 for more information.

# Related CAHS internal policies, procedures and guidelines

Antimicrobial Stewardship Policy

ChAMP Empiric Guidelines and Monographs

**KEMH Neonatal Medication Protocols** 

### References

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- 7. Paediatric Formulary Committee. BNF for Children: 2020. London: BMJ Group Pharmaceutical Press; 2021.

<sup>\*\*</sup>Please note: The information contained in this guideline is to assist with the preparation and administration of **amoxicillin / clavulanic acid**. Any variations to the doses recommended should be clarified with the prescriber prior to administration\*\*

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