

**Oral suspension**

CAUTIONARY AND ADVISORY LABELS 5, 9

▶ **Azithromycin (Non-proprietary)**▶ **Azithromycin 40 mg per 1 ml** Azithromycin 200mg/5ml oral suspension | 15 ml [PoM] £6.18 DT = £4.06 | 30 ml [PoM] £11.04 DT = £11.04▶ **Zithromax** (Pfizer Ltd)▶ **Azithromycin 40 mg per 1 ml** Zithromax 200mg/5ml oral suspension | 15 ml [PoM] £4.06 DT = £4.06 | 22.5 ml [PoM] £6.10 DT = £6.10 | 30 ml [PoM] £11.04 DT = £11.04**Capsule**

CAUTIONARY AND ADVISORY LABELS 5, 9, 23

▶ **Azithromycin (Non-proprietary)**▶ **Azithromycin (as Azithromycin dihydrate) 250 mg** Azithromycin 250mg capsules | 4 capsule [PoM] £2.44-£10.10 | 6 capsule [PoM] £5.15 DT = £3.02▶ **Zithromax** (Pfizer Ltd)▶ **Azithromycin (as Azithromycin dihydrate) 250 mg** Zithromax 250mg capsules | 4 capsule [PoM] £7.16 | 6 capsule [PoM] £10.74 DT = £3.02

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**Clarithromycin**

01-May-2019

● **INDICATIONS AND DOSE****Respiratory-tract infections | Mild to moderate skin and soft-tissue infections**

▶ BY MOUTH USING IMMEDIATE-RELEASE MEDICINES

▶ Neonate: 7.5 mg/kg twice daily.

▶ Child 1 month-11 years (body-weight up to 8 kg): 7.5 mg/kg twice daily

▶ Child 1 month-11 years (body-weight 8-11 kg): 62.5 mg twice daily

▶ Child 1 month-11 years (body-weight 12-19 kg): 125 mg twice daily

▶ Child 1 month-11 years (body-weight 20-29 kg): 187.5 mg twice daily

▶ Child 1 month-11 years (body-weight 30-40 kg): 250 mg twice daily

▶ Child 12-17 years: 250 mg twice daily usually for 7-14 days, increased to 500 mg twice daily, if required in severe infections (e.g. pneumonia)

▶ BY MOUTH USING MODIFIED-RELEASE MEDICINES

▶ Child 12-17 years: 500 mg once daily usually for 7-14 days, increased to 1 g once daily, if required in severe infections (e.g. pneumonia)

▶ BY INTRAVENOUS INFUSION

▶ Child 1 month-11 years: 7.5 mg/kg every 12 hours (max. per dose 500 mg every 12 hours) maximum duration 5 days, switch to oral route when appropriate, to be administered into a large proximal vein

▶ Child 12-17 years: 500 mg every 12 hours maximum duration 5 days, switch to oral route when appropriate, to be administered into a large proximal vein

**Acute exacerbation of bronchiectasis**

▶ BY MOUTH USING IMMEDIATE-RELEASE MEDICINES

▶ Child 1 month-11 years (body-weight up to 8 kg): 7.5 mg/kg twice daily for 7-14 days

▶ Child 1 month-11 years (body-weight 8-11 kg): 62.5 mg twice daily for 7-14 days

▶ Child 1 month-11 years (body-weight 12-19 kg): 125 mg twice daily for 7-14 days

▶ Child 1 month-11 years (body-weight 20-29 kg): 187.5 mg twice daily for 7-14 days

▶ Child 1 month-11 years (body-weight 30-40 kg): 250 mg twice daily for 7-14 days

▶ Child 12-17 years: 250-500 mg twice daily for 7-14 days

**Acute cough [if systemically very unwell or at higher risk of complications]**

▶ BY MOUTH USING IMMEDIATE-RELEASE MEDICINES

▶ Child 1 month-11 years (body-weight up to 8 kg): 7.5 mg/kg twice daily for 5 days

- ▶ Child 1 month-11 years (body-weight 8-11 kg): 62.5 mg twice daily for 5 days
- ▶ Child 1 month-11 years (body-weight 12-19 kg): 125 mg twice daily for 5 days
- ▶ Child 1 month-11 years (body-weight 20-29 kg): 187.5 mg twice daily for 5 days
- ▶ Child 1 month-11 years (body-weight 30-40 kg): 250 mg twice daily for 5 days
- ▶ Child 12-17 years: 250-500 mg twice daily for 5 days

**Acute otitis media**

▶ BY MOUTH USING IMMEDIATE-RELEASE MEDICINES

▶ Neonate: 7.5 mg/kg twice daily.

▶ Child 1 month-11 years (body-weight up to 8 kg): 7.5 mg/kg twice daily for 5-7 days

▶ Child 1 month-11 years (body-weight 8-11 kg): 62.5 mg twice daily for 5-7 days

▶ Child 1 month-11 years (body-weight 12-19 kg): 125 mg twice daily for 5-7 days

▶ Child 1 month-11 years (body-weight 20-29 kg): 187.5 mg twice daily for 5-7 days

▶ Child 1 month-11 years (body-weight 30-40 kg): 250 mg twice daily for 5-7 days

▶ Child 12-17 years: 250-500 mg twice daily for 5-7 days

▶ BY INTRAVENOUS INFUSION

▶ Child 1 month-11 years: 7.5 mg/kg every 12 hours (max. per dose 500 mg every 12 hours) maximum duration 5 days, switch to oral route when appropriate, to be administered into a large proximal vein

▶ Child 12-17 years: 500 mg every 12 hours maximum duration 5 days, switch to oral route when appropriate, to be administered into a large proximal vein

**Prevention of pertussis**

▶ BY MOUTH USING IMMEDIATE-RELEASE MEDICINES

▶ Neonate: 7.5 mg/kg twice daily for 7 days.

▶ Child 1 month-11 years (body-weight up to 8 kg): 7.5 mg/kg twice daily for 7 days

▶ Child 1 month-11 years (body-weight 8-11 kg): 62.5 mg twice daily for 7 days

▶ Child 1 month-11 years (body-weight 12-19 kg): 125 mg twice daily for 7 days

▶ Child 1 month-11 years (body-weight 20-29 kg): 187.5 mg twice daily for 7 days

▶ Child 1 month-11 years (body-weight 30-40 kg): 250 mg twice daily for 7 days

▶ Child 12-17 years: 500 mg twice daily for 7 days

***Helicobacter pylori* eradication in combination with omeprazole, and amoxicillin or metronidazole**

▶ BY MOUTH

▶ Child 1-5 years: 7.5 mg/kg twice daily (max. per dose 500 mg)

▶ Child 6-11 years: 7.5 mg/kg twice daily (max. per dose 500 mg)

▶ Child 12-17 years: 500 mg twice daily

**Acute sinusitis**

▶ BY MOUTH USING IMMEDIATE-RELEASE MEDICINES

▶ Child 1 month-11 years (body-weight up to 8 kg): 7.5 mg/kg twice daily for 5 days

▶ Child 1 month-11 years (body-weight 8-11 kg): 62.5 mg twice daily for 5 days

▶ Child 1 month-11 years (body-weight 12-19 kg): 125 mg twice daily for 5 days

▶ Child 1 month-11 years (body-weight 20-29 kg): 187.5 mg twice daily for 5 days

▶ Child 1 month-11 years (body-weight 30-40 kg): 250 mg twice daily for 5 days

▶ Child 12-17 years: 250 mg twice daily for 5 days, alternatively 500 mg twice daily for 5 days

- **UNLICENSED USE** [EvGr] Duration of treatment for acute sinusitis differs from product literature and adheres to