

Co-trimoxazole by mouth is the drug of choice for prophylaxis against pneumocystis pneumonia. Co-trimoxazole may be used in infants born to mothers with a high risk of transmission of infection.

Inhaled pentamidine isetonate is better tolerated than parenteral pentamidine isetonate. Intermittent inhalation of pentamidine isetonate is used for prophylaxis against pneumocystis pneumonia in children unable to tolerate co-trimoxazole. It is effective but children may be prone to extrapulmonary infection. Alternatively, dapsone can be used.

ANTIPROTOZOALS

Atovaquone

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● INDICATIONS AND DOSE

Treatment of mild to moderate *Pneumocystis jirovecii* (*Pneumocystis carinii*) pneumonia in patients intolerant of co-trimoxazole

► BY MOUTH

- Child 1–2 months: 15–20 mg/kg twice daily for 14–21 days, dose to be taken with food, particularly high fat food
- Child 3 months–1 year: 22.5 mg/kg twice daily for 14–21 days, dose to be taken with food, particularly high fat food
- Child 2–17 years: 15–20 mg/kg twice daily (max. per dose 750 mg) for 14–21 days, dose to be taken with food, particularly high fat food

- **UNLICENSED USE** Not licensed for use in children.
- **CAUTIONS** Other causes of pulmonary disease should be sought and treated · initial diarrhoea and difficulty in taking with food may reduce absorption (and require alternative therapy)
- **INTERACTIONS** → Appendix 1: antimalarials
- **SIDE-EFFECTS**
 - **Common or very common** Anaemia · angioedema · bronchospasm · diarrhoea · headache · hypersensitivity · hyponatraemia · insomnia · nausea · neutropenia · skin reactions · throat tightness · vomiting
 - **Frequency not known** Stevens-Johnson syndrome
- **PREGNANCY** Manufacturer advises avoid unless potential benefit outweighs risk—no information available.
- **BREAST FEEDING** Manufacturer advises avoid.
- **HEPATIC IMPAIRMENT** Manufacturer advises use with caution in significant impairment and monitor closely—no information available.
- **RENAL IMPAIRMENT** Manufacturer advises caution. **Monitoring** Monitor more closely in renal impairment.
- **PRESCRIBING AND DISPENSING INFORMATION** Flavours of oral liquid formulations may include tutti-frutti.

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

Oral suspension

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► Wellvone (GlaxoSmithKline UK Ltd)

Atovaquone 150 mg per 1 ml Wellvone 750mg/5ml oral suspension sugar-free | 226 ml [PoM](#) | £486.37 DT = £486.37

Dapsone

● INDICATIONS AND DOSE

Treatment of mild to moderate *Pneumocystis jirovecii* (*Pneumocystis carinii*) pneumonia (in combination with trimethoprim)

► BY MOUTH

- Child 1 month–11 years: 2 mg/kg once daily (max. per dose 100 mg)
- Child 12–17 years: 100 mg once daily

Prophylaxis of *Pneumocystis jirovecii* (*Pneumocystis carinii*) pneumonia

► BY MOUTH

- Child: 2 mg/kg once daily (max. per dose 100 mg)

- **UNLICENSED USE** Not licensed for treatment of pneumocystis (*P. jirovecii*) pneumonia. Monotherapy not licensed for children for prophylaxis of *P. jirovecii* pneumonia.
- **CAUTIONS** Anaemia (treat severe anaemia before starting) · avoid in Acute porphyrias p. 624 · cardiac disease · G6PD deficiency · pulmonary disease · susceptibility to haemolysis
- **INTERACTIONS** → Appendix 1: dapsone
- **SIDE-EFFECTS** Agranulocytosis · appetite decreased · haemolysis · haemolytic anaemia · headache · hepatic disorders · hypoalbuminaemia · insomnia · lepra reaction · methaemoglobinemia · motor loss · nausea · peripheral neuropathy · photosensitivity reaction · psychosis · severe cutaneous adverse reactions (SCARs) · skin reactions · tachycardia · vomiting
- **SIDE-EFFECTS, FURTHER INFORMATION** Side-effects are dose-related. If dapsone syndrome occurs (rash with fever and eosinophilia)—discontinue immediately (may progress to exfoliative dermatitis, hepatitis, hypoalbuminaemia, psychosis and death).
- **PREGNANCY** Folic acid p. 594 (higher dose) should be given to mother throughout pregnancy; neonatal haemolysis and methaemoglobinemia reported in third trimester.
- **BREAST FEEDING** Haemolytic anaemia; although significant amount in milk, risk to infant very small unless infant is G6PD deficient.
- **PATIENT AND CARER ADVICE** Blood disorders On long-term treatment, patients and their carers should be told how to recognise signs of blood disorders and advised to seek immediate medical attention if symptoms such as fever, sore throat, rash, mouth ulcers, purpura, bruising or bleeding develop.

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug. Forms available from special-order manufacturers include: oral suspension, oral solution

Tablet

CAUTIONARY AND ADVISORY LABELS 8

► Dapsone (Non-proprietary)

Dapsone 50 mg Dapsone 50mg tablets | 28 tablet [PoM](#) | £36.22 DT = £18.42

Dapsone 100 mg Dapsone 100mg tablets | 28 tablet [PoM](#) | £97.39 DT = £89.29

Pentamidine isetonate

● INDICATIONS AND DOSE

Treatment of *Pneumocystis jirovecii* (*Pneumocystis carinii*) pneumonia (specialist use only)

► BY INTRAVENOUS INFUSION

- Child: 4 mg/kg once daily for at least 7–10 days

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