

Drugs at a Glance: Miscellaneous Antibacterials

Generic/Trade Name	Routes and Dosage Ranges	
	Adults	Children
Chloramphenicol (Chloromycetin)	PO, IV 50–100 mg/kg/d in four divided doses q6h	<i>Children and full-term infants >2 wk:</i> PO 50 mg/kg/d in three or four divided doses q6–8h
Clindamycin hydrochloride (Cleocin)	PO 150–300 mg q6h; up to 450 mg q6h for severe infections	PO 8–16 mg/kg/d in three or four divided doses q6–8h; up to 20 mg/kg/d in severe infections
Clindamycin phosphate (Cleocin phosphate)	IM 600 mg–2.7 g/d in two to four divided doses, q6–12h IV 600 mg–2.7 g/d in two to four divided doses; up to 4.8 g/d in life-threatening infections	IM, IV 15–40 mg/kg/d in three or four divided doses q6–8h; up to 40 mg/kg/d in severe infections
Clindamycin palmitate (Cleocin Pediatric–75 mg/mL)		PO 8–12 mg/kg/d in three or four divided doses; up to 25 mg/kg/d in very severe infections. For children weighing ≤10 kg, the minimum dose is 37.5 mg, three times per day.
Linezolid (Zyvox)	PO 400–600 mg q12h IV 600 mg over 30–120 min q12h (for serious infections)	Dosage not established
Metronidazole (Flagyl)	Anaerobic bacterial infection, IV 15 mg/kg (about 1 g for a 70-kg adult) as a loading dose, infused over 1 h, followed by 7.5 mg/kg (about 500 mg for a 70-kg adult) q6h as a maintenance dose, infused over 1 h. Duration usually 7–10 d; maximum dose 4 g/d <i>Surgical prophylaxis, colorectal surgery,</i> IV 15 mg/kg, infused over 30–60 min, infusion to be completed about 1 h before surgery, followed by 7.5 mg/kg, infused over 30–60 min, at 6 h and 12 h after the initial dose <i>C. difficile colitis,</i> PO 1–2 g daily for 7–10 d	Dosage not established
Quinupristin/dalfopristin (Synercid)	IV 7.5 mg/kg over 60 min q12h for skin and skin structure infections, and q8h for VREF bacteremia.	Dosage not established
Spectinomycin Vancomycin	IM 2 g in a single dose PO 500 mg q6h or 1 g q12h; maximum dose, 4 g/d IV 2 g/d in two to four divided doses, q6–12h	Dosage not established PO, IV 40 mg/kg/d in divided doses <i>Infants and neonates:</i> IV 15 mg/kg initially, then 10 mg/kg q12h for neonates up to 7 d of age, then q8h up to 1 mo of age

VREF, vancomycin-resistant *Enterococcus faecium*.

dial conjunctivitis in newborns (ophthalmic ointment); and to treat other infections (eg, Legionnaire's disease, genitourinary infections caused by *Chlamydia trachomatis*, intestinal amebiasis caused by *Entamoeba histolytica*).

In addition, azithromycin is approved for treatment of urethritis and cervicitis caused by *C. trachomatis* organisms, and is being used for the prevention and treatment of MAC disease. Clarithromycin is approved for prevention and treatment of MAC disease. For prevention, clarithromycin may be used alone; for treatment, it is combined with one or two other drugs (eg, ethambutol or rifabutin) to prevent the emergence of drug-resistant organisms. Clarithromycin is also used to treat *Helicobacter pylori* infections associated with peptic ulcer disease.

Contraindications to Use

Macrolides are contraindicated in people who have had hypersensitivity reactions. They are also contraindicated or must be used with caution in clients with pre-existing liver disease.

MISCELLANEOUS ANTIBACTERIAL DRUGS

- **Chloramphenicol** (Chloromycetin) is a broad-spectrum, bacteriostatic antibiotic that is active against most gram-positive and gram-negative bacteria, rickettsiae, chlamydiae, and treponemes. It acts by interfering with microbial protein synthesis. It is well absorbed and diffuses well into body tissues and fluids, including cerebrospinal fluid (CSF), but low drug levels are obtained in urine. It is metabolized in the liver and excreted in the urine.

Chloramphenicol is rarely used in infections caused by gram-positive organisms because of the effectiveness and low toxicity of penicillins, cephalosporins, and macrolides. Each of the alternate classes of antibiotics has a more favorable safety profile and should be considered first, before chloramphenicol. It is indicated for use in serious infections for which no adequate substitute drug is available. Specific infections include meningococcal, pneumococcal, or *Haemophilus meningitis* in