

Document control sheet

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AREA IN WHICH THIS MONOGRAPH APPLIES	Paeds

DIVISIONAL AUTHORISATION		
GROUP	DATE	
Paediatric monograph review group	16/12/22	
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AUTHORS		
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If review:

Reviewed by: Ellie Cheale	Position Specialist Pharmacist, Women's and Children's	Date 21.06.23
Updated and transferred to new template by:		

Change history:

Changes Reference	Change details	Date
	Removal of IV injection method of administration. Advocation of intravenous infusion for all Neonatal and Paediatric patients.	21.06.23



Paeds: Clindamycin

Presentation:	600mg in 4mL injection
Indication:	Susceptible infections as per microbiology.
	Confirmed or suspected Group A Streptococcus (GAS) infection.
Dose:	Child over 1month of age: 3.75–6.25 mg/kg every 6 hours; increased if necessary up to 10 mg/kg every 6 hours (max. per dose 1.2 g), increased dose used for severe infections, total daily dose may alternatively be given in 3 divided doses (i.e. every 8 hours).
	Child 12–17 years: 1.2–1.8 g daily in 2–4 <u>divided</u> doses, for less complicated infections; increased to 1.8–2.7 g daily in 2–3 <u>divided</u> doses, for severe infections; increased if necessary up to 4.8 g daily, for lifethreatening infections (max. per dose 1.2 g).
Route of administration:	Intravenous infusion
	Note: Can be administered via intramuscular injection (<u>maximum of 600mg per dose</u>) where intravenous route is not available.
	Doses ≥600mg to be administered by intravenous intermittent infusion ONLY.
	Intramuscular injection should only be considered when the intravenous route is not possible or less appropriate
Instructions for	Drug concentration is 150mg/mL
preparation	
and	Intravenous infusion:
administration:	Avoid rapid intravenous administration.
	MUST be further diluted before being administered intravenously.
	Dilute to a maximum concentration of 18 mg/mL with Glucose 5% or Sodium Chloride 0.9%.
	Give over 10–60 minutes at a maximum rate of 20 mg/kg/hour.
	Intramuscular injection:
	Can be given without further dilution
<u>Prescribing</u>	Prescribe on EPMA as per Trust prescribing policy
	Example prescription for a 20kg 7-year-old child:
	Step 1: Calculate the dose 20kg x 6.25mg/kg = 125mg per dose Step 2: Remembering that the final concentration is 150mg/ml – work out if this dose is measurable. 125mg ÷ 150mg/ml =0.8333 mL – this is not measurable; therefore, the closest measurable dose is 0.8ml x 150mg/ml = 120mg
	Step 3: On EPMA prescribe 120mg in diluent of choice (glucose 5% or sodium chloride 0.9%) as an intravenous infusion (intramuscular injection only where IV access unavailable and only where a dose is <600mg).
	Where prescribing an infusion Step 4: Maximum concentration is 18mg/mL, therefore 120mg ÷ 18 (mg/mL) = 6.66, therefore total volume can be any volume >6.66mL i.e. 120mg in 7mL

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Known compatibility issues	See Medusa via Net-I for the most up-to-date compatibility data.
Additional	Flush Information:
Comments:	 Flush with sodium chloride 0.9%. A volume of medicine (which may be clinically significant) remains in the infusion set at the end of the infusion. To minimise medicine loss, the infusion set must be flushed at the same rate the medicine was administered. Follow local policy.
	Clindamycin has good oral bioavailability – consider IV to oral switch as soon as clinically appropriate.

Note: The contents of this monograph should be read in conjunction with information available in the BNFC and Medusa

References:

<u>Injectable Medicines Guide - Display - Clindamycin - Intravenous - Version 11 - IVGuideDisplayMain.asp</u> (wales.nhs.uk) — <u>Clindamycin.</u> Last accessed 21.06.2023

Using-bolus-IV-injections-in-neonates-children-and-young-people-update.pdf (nppg.org.uk) last accessed 21.06.2023 Clindamycin 150mg/ml Solution for Injection or Infusion - Summary of Product Characteristics (SmPC) - (emc) (medicines.org.uk) last accessed 05.12.2022

https://bnfc.nice.org.uk/clindamycin Last accessed 21.06.2023

Evelina paediatric formulary last accessed 05.12.2022