Clindamycin parenteral therapy

Due to the Sandoz drug shortage, clindamycin IV is at risk of being in short supply if current usage patterns continue. Therefore in order to conserve supply of clindamycin IV, please ensure that the following Alberta Health Services (AHS) approved therapeutic interchanges (TIs) are applied wherever possible/appropriate.

In particular, please assess whether patients on clindamycin IV could be switched to oral clindamycin since it is well absorbed orally. The last therapeutic interchange listed below provides guidance on when this substitution is appropriate and what oral dosages to use.

<table>
<thead>
<tr>
<th>Original Order</th>
<th>Interchange</th>
<th>Complexity Level</th>
</tr>
</thead>
<tbody>
<tr>
<td>Clindamycin IV greater than 600 mg per dose</td>
<td>Clindamycin IV 600 mg, excluding obstetrics and gynecology patients</td>
<td>Level 1</td>
</tr>
<tr>
<td>Clindamycin IV Q6H</td>
<td>Clindamycin IV Q8H at same dose</td>
<td>Level 1</td>
</tr>
<tr>
<td>Clindamycin IV where patient is on enteral feeds or oral/NG medications.</td>
<td>Clindamycin 300 mg PO QID*, excluding obstetrics and gynecology patients</td>
<td>Level 2</td>
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</tbody>
</table>

NOTE: For rapidly progressive skin and soft tissue infections, stepdown can only occur after debridement/surgery.

*For treatment of osteomyelitis or second line therapy of Pneumocystis (carinii) jiroveci pneumonia (PCP/PJP), change to 450 mg PO qid. For PCP/PJP, hypoxic (paO2<70)/severely ill patients should remain on Clindamycin IV (plus primaquine PO).

For other indications, prescriber can increase up to 450 mg PO QID.

Complexity Levels:
Level 1: Lowest Complexity - No patient specific information required/minimal pharmacist assessment of monitoring required.
Level 2: Mid Complexity - Additional patient specific information required/additional pharmacist assessment required.

Action: Please post this notice in your area and ensure all staff are informed.

Contact: Site Pharmacy Department for any questions or concerns.

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