

INFECTIONS

2. ANTIBACTERIALS

2.8. MISCELLANEOUS

VANCOLON

Presentation

Sterile powder: Pack of 1 vial

Composition

The vial contains sterile vancomycin HCl (USP) powder equivalent to 0.5g vancomycin.

Indications

- Infections due to *Staphylococci*, including Staphylococcal endocarditis, septicemia, bone infections, lower respiratory tract infections, and skin and skin structure infections.
- Hypersensitive patients, who cannot tolerate or who have failed to respond to other drugs, including the penicillins or cephalosporins and for infections caused by vancomycin susceptible organisms that are resistant to other antimicrobial drugs.

Dosage and Administration

Vancolon is given by I.V. infusion (*For reconstitution, refer to the insert leaflet.*).

Note: The parenteral form of vancomycin may be administered orally for the treatment of antibiotic - associated pseudomembranous colitis caused by *C. difficile* and for staphylococcal enterocolitis.

Adults: Usually, 2g divided either into 0.5g every 6 hours or 1g every 12 hours. Each dose should be administered at no more than 10mg/min or over a period of at least 60 minutes, whichever is longer. Other patient factors, such as age or obesity, may call for modification of the usual intravenous daily dose.

Children: Usually, 10mg/kg given every 6 hours. Each dose should be administered over a period of at least 60 minutes.

Infants and Neonates: Initially, 15mg/kg is suggested, followed by 10mg/kg every 12 hours for neonates in the 1st week of life and every 8 hours thereafter up to the age of 1 month. Each dose should be administered over 60 minutes. Close monitoring of serum concentrations of vancomycin may be warranted in these patients.

Patients with Impaired Renal Function: Dosage adjustment must be made in patients with impaired renal function. In premature infants and the elderly, greater dosage reductions than expected may be necessary because of decreased renal function. Measurement of vancomycin serum concentrations can be helpful in optimizing therapy, especially in seriously ill patients with changing renal function (*For a table of recommended regimen and for further information, refer to the insert leaflet.*).

