



DRUG SHORTAGE UPDATE!

INJECTABLE RESPIRATORY FLUOROQUINOLONES

- **moxifloxacin and levofloxacin INJECTION**

Update:

- moxifloxacin injection remains on limited supply for several more months. NH continues to have stock thanks to IV to oral stepdown efforts reducing use of injectable form by 60% over past 6 months! *Thank you!*
- levofloxacin injection, a possible alternate, is now available in the 500 mg/100 mL format size.

Practice Implications* :

Levofloxacin: Reminder: spectrum difference compared to moxifloxacin!!

Anaerobes: moxifloxacin has variable activity, levofloxacin has no activity.

Pseudomonas: moxifloxacin has no activity, levofloxacin has variable activity

Moxifloxacin INJ: Conservation efforts continue to be needed!

All moxifloxacin IV orders to be assessed for oral conversion daily!

Fluoroquinolones have high oral bioavailability and oral is equally potent to the IV form

moxifloxacin 400 mg IV = moxifloxacin 400 mg PO

levofloxacin 500 mg IV = levofloxacin 500 mg PO

January 2, 2018 All NH sites/units: PLEASE POST	Best Practice		For further information contact: Nancy Dyck (250-261-7555) or Gordon Harper (778-349-3216) NH Medication Use Management Pharmacists mumpharmacist@northernhealth.ca
	Drug Discontinuation		
	Label Change		
	Medication Change	✓	
	Drug Shortage	✓	
	Formulary changes		

**Assessment criteria for IV to PO stepdown:
(refer to Clinical Practice Standard 1-20-6-1-010)**

a. Improving clinically:

- Consistent improvement in fever over the last 24 hours or patient is afebrile (less than 38°C)
- White blood cells decreasing
- Hemodynamically stable

b. Able to tolerate and absorb oral medications:

- Tolerating enteral feeds or eating/drinking fluid diet; taking other medications orally
- No severe or persistent nausea, vomiting or diarrhea
- No gastrointestinal obstruction, ileus, malabsorption syndrome, active gastrointestinal (GI) bleed or continuous gastric suctioning if orogastric/nasogastric (N/G)

c. Patient meets above criteria as well as the following:

- Pathogen known to be susceptible to the oral antimicrobial to be used
- Patient is greater than 18 years of age
- Patient is **not** nothing by mouth (NPO) status and is taking medications orally
- Patient on continuous feeds are able to tolerate holding feeds when required for oral medications that interact
- Patient does **not** have difficulty swallowing or loss of consciousness with no orogastric/N/G available
- Patient does **not** have Short Gut syndrome
- Patient is **not** being treated for the following conditions:
 - Febrile neutropenia
 - Bacteremia with *staphylococcus aureus* or enterococcus species
 - Severe sepsis
 - CNS infection (e.g., meningitis, encephalitis)
 - Endophthalmitis
 - Endocarditis
 - Osteomyelitis/discitis
 - Vertebral or deep abscesses
 - Bone and joint infections
 - Septic arthritis