



## MONOGRAPH

### Ertapenem Monograph - Paediatric

Scope (Staff):	Medical, Pharmacy, Nursing
Scope (Area):	All Clinical Areas

#### Child Safe Organisation Statement of Commitment

CAHS commits to being a child safe organisation by applying the National Principles for Child Safe Organisations. This is a commitment to a strong culture supported by robust policies and procedures to reduce the likelihood of harm to children and young people.

This document should be read in conjunction with this [DISCLAIMER](#)

#### QUICKLINKS

<a href="#">Dosage/Dosage Adjustments</a>	<a href="#">Administration</a>	<a href="#">Compatibility</a>	<a href="#">Monitoring</a>
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#### DRUG CLASS

Carbapenem antibiotic.<sup>(1-4)</sup>

#### INDICATIONS AND RESTRICTIONS

##### IV: Protected (red) Antibiotic

ChAMP approval is required prior to prescription.

- Ertapenem is active against many resistant enteric Gram-negative rods, anaerobes and many Gram-positive organisms. It has poor activity against *Pseudomonas aeruginosa*, *Enterococcus* and *Acinetobacter* species and poor central nervous system (CNS) penetration.<sup>(3, 5, 6)</sup>
- Ertapenem is inactive against Methicillin Resistant Staphylococcus aureus (MRSA), Vancomycin resistant Enterococci (VRE), *Enterococcus faecium*, Mycoplasma species, Chlamydia species and *Stenotrophomonas maltophilia*.<sup>(3, 5)</sup>

#### CONTRAINDICATIONS

- Hypersensitivity to ertapenem, [high risk allergy](#) to carbapenems or any component of the formulation.<sup>(3, 6-8)</sup>

## PRECAUTIONS

- Ertapenem may be prescribed in selected patients with high-risk allergy to another beta-lactam sub-class (e.g. some penicillins and cephalosporins) in discussion with immunology.
- In patients with a previous [low risk reaction](#) to ertapenem or another carbapenem (delayed rash [ $>1$ hr after initial exposure] without mucosal or systemic involvement) the risk of subsequent reaction is low. Re-challenge may be acceptable in discussion with immunology.<sup>(2, 3, 8, 9)</sup>
- Each gram of ertapenem contains approximately 137 mg (6 mmol) of sodium.<sup>(3, 6, 8, 10)</sup>
- Avoid use in combination with sodium valproate when possible due to a significant reduction in the concentration of sodium valproate.<sup>(3, 4, 6, 8)</sup>
- Ertapenem should be used with caution in patients with CNS disorders (e.g. a history of seizures) and/ or renal impairment as there is an increased risk of seizures.<sup>(7, 9, 10)</sup>

## FORMULATIONS

Listed below are products available at PCH, other formulations may be available, check with pharmacy if required:

- 1 gram powder for injection

Imprest location: [Formulary One](#)

## DOSAGE & DOSAGE ADJUSTMENTS

### Neonates and infants under 3 months of age:

Not routinely used in neonates or infants  $< 3$  months old; contact infectious diseases or clinical microbiology for advice.

### IV/IM:

#### Usual dose:

**$\geq 3$  months to  $<12$  years:** 15 mg/kg/dose (to a maximum of 500 mg) twice daily.<sup>(1, 3, 4, 8, 9)</sup>

**$\geq 12$  years:** 1 gram once daily.<sup>(1, 3, 4, 8, 9)</sup>

**[Dosing in Overweight and Obese Children:](#)** Dose based on measured body weight.<sup>(10, 11)</sup>

### Renal impairment:

#### [eGFR calculator](#)

- Use ertapenem cautiously in patients with impaired renal function due to an increased risk of seizures.<sup>(3, 8, 9)</sup>

eGFR  $\geq 30$  mL/minute/1.73 m<sup>2</sup>: normal dosing.<sup>(4)</sup>

eGFR  $<30$  mL/minute/1.73 m<sup>2</sup>:  $\geq 12$  years of age: 500 mg once daily.<sup>(4)</sup>

eGFR  $<30$  mL/minute/1.73 m<sup>2</sup>:  $< 12$  years of age: no data available, consider an alternative agent.<sup>(4)</sup>

**Hepatic impairment:**

- No studies have been conducted in hepatic impairment, it appears no dosage adjustment is required.<sup>(4, 8)</sup>

**RECONSTITUTION & ADMINISTRATION****Reconstitution – Intravenous:**<sup>(2, 6, 12)</sup>

- Reconstitute each vial with the volume of water for injection in the table below. Further dilution with a compatible fluid may be required.

Brand	Volume of water for infection	Resulting concentration	Powder volume
Juno and Kabi	9.3 mL	100 mg/mL	0.7 mL
Invanz brand	10 mL	100 mg/mL	No information

**Administration****IV infusion:**

- Dilute to a final concentration of 20 mg/mL or weaker and infuse over 30 minutes.<sup>(2, 4, 6, 8)</sup>

**Continuous infusion:**

- Total daily dose may be given over 24 hours via continuous [Baxter infusion](#).

**Reconstitution – Intramuscular:**<sup>(2, 6, 12)</sup>

Brand	Volume of lidocaine (lignocaine) 1%	Resulting concentration	Powder volume
Juno and Kabi	3.2 mL	250 mg/mL	0.8 mL
Invanz brand	3.2 mL	250 mg/mL	No information

**Note: Preparations with lidocaine (lignocaine) 1% (10 mg/mL) as diluent must NEVER be given intravenously.**<sup>(2, 8, 10)</sup>

**Administration****IM injection:**

Doses up to 1 gram may be injected into a large muscle mass. Refer to the [Intramuscular Injections Guideline](#) (internal link) for advice.<sup>(2, 4, 12)</sup>

**COMPATIBILITY (LIST IS NOT EXHAUSTIVE)****Compatible fluids:**

- Sodium chloride 0.9%<sup>(2, 10, 12)</sup>

**INCOMPATIBLE fluids:** Ertapenem is INCOMPATIBLE with glucose 5%, Hartmann's, Mannitol, Ringer's solution and sodium bicarbonate - IV lines should be flushed with sodium chloride 0.9% prior to administration.<sup>(2, 6, 10, 13)</sup>

**Compatible at Y-site:**

[Compatibilities of IV drugs](#) must be checked when two or more drugs are given concurrently.

**MONITORING**

Renal, hepatic and haematological function should be monitored weekly with prolonged therapy (i.e. longer than 7 days). In patients with a history of seizures, neurological assessment should be considered.<sup>(3, 4, 7, 10, 13)</sup>

**ADVERSE EFFECTS**

**Common:** nausea, vomiting, diarrhoea, headache, injection site reactions (e.g. phlebitis).<sup>(3, 9)</sup>

**Infrequent:** itch, rash, hot flushes, melaena. *Clostridioides difficile*-associated disease, fever, fatigue, pain, hypotension, constipation, confusion, dizziness, dyspnoea, erythema, taste disturbance, altered liver function tests (LFT's), neutropenia.<sup>(3, 9)</sup>

**Rare:** seizures, hallucinations, changes in mental state, aggression, delirium, anaphylaxis, tooth discolouration. <sup>(3, 9)</sup>

**STORAGE**

- Store vial below 25°C.<sup>(2, 6, 8)</sup>

**INTERACTIONS**

This medication may interact with other medications; consult PCH approved references (e.g. [Clinical Pharmacology](#)), a clinical pharmacist or PCH Medicines Information Service on extension 63546 for more information.

*\*\*Please note: The information contained in this guideline is to assist with the preparation and administration of **ertapenem**. Any variations to the doses recommended should be clarified with the prescriber prior to administration\*\**

**Related CAHS internal policies, procedures and guidelines**

[Antimicrobial Stewardship Policy](#)

[ChAMP Empiric Guidelines and Monographs](#)




[KEMH Neonatal Medication Protocols](#)

**References**

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This document can be made available in alternative formats on request.

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