

# Long term azithromycin (adults) - prescribing and monitoring responsibilities

Azithromycin is used long term for the prevention of exacerbations of bronchiectasis and COPD for patients who fulfil criteria NICE criteria. Usual dose is 250mg Three times a week (Monday Wednesday and Friday) as a pragmatic starting dose which can then be increased according to clinical response and adverse events.

## **RESPIRATORY CONSULTANT RESPONSIBILITIES**

- Initiation and supply of first months treatment
- Monitoring:
  - Base line ECG to ensure QTc interval is less than 450msec.
  - o Base line Liver function tests (LFTs) and full blood count (FBC) –repeat after 2 weeks.

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- Medication review to exclude interactions of any concomitant drugs which may cause prolonged QTc interval or other interaction e.g. Digoxin
- 3 x sputum for AFB confirmed negative prior to starting for Bronchiectasis patients.
- Repeat LFTs every 6 months
- 3 Month Assessment
  - Assess response to and tolerability of treatment.
  - If no symptomatic improvement but a reduction in exacerbation frequency, discuss with the patient whether they wish to continue for a total of 12 months then consider stopping.
  - If patient reports tinnitus or hearing loss then stop azithromycin and refer for pure tone audiometry test
  - If treatment continues beyond 12 months consider breaks during the summer months.
- 6 monthly assessments.
- Advise people about the small risk of hearing loss and tinnitus, and tell them to contact a healthcare professional if this occurs.
- Give the patient a copy of the azithromycin leaflet

#### **Exclusion Criteria**

- LFT's > 2x upper limit of normal
- Atypical mycobacterial infection
- Allergy to Azithromycin

## **Communication with GP**

• Explain importance to patient and GP of not starting other long term (> 4 weeks) antibiotic treatments (except for treatment of exacerbations with short courses of non-macrolide antibiotics and steroids) during 3 month review period.

Review date: Jan 2021

#### **GP RESPONSIBILITIES**

Approved SWYAPC – 1st August 2019

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Approved MMC July MMC



• On-going supply of azithromycin

## **EXIT CRITERIA PRIOR TO 3 MONTH REVIEW**

- Tinnitus or hearing loss stop immediately.
- Increase in LFT's to > 2x upper limit of normal stop immediately
- Side effects rash, GI symptoms, dizziness discuss continuing/stopping with the patient

## Reference:

Chronic obstructive pulmonary disease in over 16s: diagnosis and management. NICE guideline [NG115] Published date: December 2018

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