Intravenous antibiotic therapy using ceftriaxone
INTRODUCTION

You are returning home after being admitted to a nursing unit, but you still need intravenous antibiotics at home to treat a bacterial infection.

You will be treated using ceftriaxone. During your stay at the hospital, your doctor, the nurse or the hospital pharmacist has already given you verbal information about your antibiotic treatment. This brochure provides a practical overview of your antibiotic treatment using ceftriaxone. It contains specific information about your therapy, about the administration of the medicine and the possible side effects, as well as some advice, including on when to contact your doctor (or GP) or (home) nurse.

The continuation of your intravenous antibiotic therapy in a home setting falls under the OPAT care programme. OPAT is an abbreviation of ‘Outpatient Parenteral Antimicrobial Therapy’. In other words, this relates to the parenteral administration of antimicrobial medicine without the patient needing to be admitted to hospital. ‘Parenteral’ means that the administration of the medicine does not happen through the gastrointestinal system (by swallowing a tablet, for example), but elsewhere in the body, such as through injection or an intravenous drip.

If you have any remaining questions after reading this brochure, please do not hesitate to let us know. The doctor, hospital pharmacist or nurses will be happy to provide more detail.
WHAT IS CEFTRIAXONE?

Ceftriaxone is an antibiotic used to treat bacterial infections. It disturbs the formation of the cell wall in bacteria, making it bactericidal.

WHAT DOSAGE WILL YOU RECEIVE?

You will be given a dose of 2 grams or 4 grams of ceftriaxone per 24 hours, depending on the type of infection.

HOW IS CEFTRIAXONE ADMINISTERED?

The ceftriaxone dose of 2 grams per 24 hours is administered once daily, while the dose of 4 grams per 24 hours is split across two administrations of 2 grams (every 12 hours). Ceftriaxone is administered via a brief intravenous infusion lasting 15 minutes.

The duration of therapy depends on the type of infection and how long you received antibiotic therapy in hospital.
WHERE WILL THIS THERAPY BE ADMINISTERED?

Your therapy will start during your stay at the hospital, and will be continued at home under the OPAT care programme.

Your home nurse will visit you every day to administer your intravenous antibiotic therapy injection.

The antibiotic and the equipment required to prepare and administer the antibiotic will be made available by the hospital pharmacy when you are discharged from the hospital. More detailed information about the preparation of the infusion can be found in the preparation procedure enclosed.

HOW WILL THE THERAPY BE MONITORED?

You will be required to visit the outpatient clinic regularly to monitor your therapy, for blood tests and a clinical examination.

We check your blood for the following:

✗ The level of inflammation in your blood: to check how the therapy is going, we need to check the level of inflammation in your blood.
Ceftriaxone treatment can have an impact on:
• the number of blood cells and platelets in your blood
• your liver function

It is unlikely that you will notice any of these effects, but your doctor can monitor them by taking blood samples.

**HOW TO STORE CEFTRIAXONE**

Unopened vials of ceftriaxone must be stored in a cool and dry place at a temperature below 30 °C, protected from light, in a safe place and out of the reach of children.

Ceftriaxone solutions must always be prepared immediately before the intravenous infusion.

Ceftriaxone solutions may turn yellow after a while. This does not have any impact on the effectiveness of the product.

**POSSIBLE SIDE EFFECTS**

Some people experience severe side effects, while others experience none at all. The occurrence of side effects has no bearing whatsoever on the effectiveness of your treatment. Please do not hesitate to contact your doctor (or GP) or (home) nurse if you have any questions or are not sure about anything.
The following side effects may occur:

- Gastrointestinal symptoms: diarrhoea, nausea and vomiting
- Headache and dizziness
- Vein inflammation (red, painful, swollen skin around your veins) as a result of the intravenous administration
- (Itchy) skin rash

OTHER MEDICATION

- Please tell the doctor and pharmacist at the hospital which other medicines, vitamins, nutritional supplements etc. you are using (both prescribed by your GP and on your own initiative).
- Contact your GP to let them know which antibiotic therapy you are receiving to treat your infection.

ADVICE

✗ If you have been diagnosed with hypersensitivity to certain antibiotics, please inform your hospital doctor. Ceftriaxone must be used with caution in patients with a known hypersensitivity to penicillin-like antibiotics.

✗ If you notice any severe hypersensitivity reactions such as a skin rash (across your entire body), itchiness, a tight chest, low blood pressure, fever or shivering, or swelling of your lips, tongue or throat, you must notify your GP immediately.
If you suffer from persistent or severe diarrhoea, even after your therapy has been stopped, you must notify your GP immediately.

Please check your body temperature on a regular basis, preferably at the same time every day and ideally in the evenings.

**WHEN AND WHO TO CONTACT**

✔ Please report to the emergency unit:
  • if you suffer from rigours (with a fever over 38 °C).

✔ Please contact your GP:
  • if you experience the following symptoms: chills, headache, sore throat, stomach cramps or a burning feeling when urinating. Never take medicines on your own initiative if you suspect that you have an infection.
  • if you suffer a reaction to the antibiotic itself: signs of an allergic reaction, severe diarrhoea, skin rash or bleeding.

✔ Please contact the home nurse:
  • if you have any problems with the catheter: painful veins, redness, swelling, a hot feeling and/or pain around the catheter.
USEFUL CONTACT NUMBERS

✔ OPAT coach at the hospitalisation unit (if applicable):
  • Telephone: ask the OPAT coach at your hospitalisation unit which number they can be reached on during working days.

✔ OPAT manager at the hospital:
  • Telephone: +32 16 34 32 74  
   (available between 08:30 and 16:30 on working days)
  • E-mail: OPAT@uzleuven.be. Your question will be answered as soon as possible, but it may take up to 48 hours to get back to you. Our inbox is not monitored during the weekend.

This brochure is also available on www.uzleuven.be/en/brochure/700848.