



NEONATAL Medication Monograph

AMPHOTERICIN LIPOSOMAL (Ambisome®)

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

Restricted: Requires Microbiologist review within 24 hours of initiation





⚠ HIGH RISK Medication

Confusion between the formulations of amphotericin deoxycholate (Fungizone®) and liposomal amphotericin (Ambisome®) may result in errors, both of prescribing and administration. These medications are **NOT** interchangeable

Presentation	Vial: 50mg Infusion solution from Pharmacy
Description	Polyene antifungal
Indications	Treatment of invasive fungal infections by susceptible fungi including <i>Candida</i> spp., <i>Aspergillus</i> spp. and <i>Cryptococcus</i> species. <i>Candida lusitanae</i> and <i>A. terreus</i> are resistant.
Dosage	IV: Initial dose – 1mg/ kg/ dose Maximum dose: 5mg/ kg/ dose
Interactions	Increased risk of nephrotoxicity if used concurrently with other nephrotoxic drugs e.g. aminoglycosides, vancomycin. Flucytosine toxicity may be enhanced Corticosteroids and diuretics may enhance the hypokalaemic effect of amphotericin B
Compatible Fluids	Glucose 5%

Preparation	<p>IV: Available from CIVAS (KEMH & PCH)</p> <p>Step 1 - Reconstitution Add 12mL of Water for Injection to 50mg vial. Shake for at least 30 seconds. Concentration =4mg/mL</p> <p>Filter reconstituted solution using supplied filter, prior to dilution.</p> <p>Step 2 - Dilution Take 5mL (20mg) of above filtered solution and make up to 10mL with Glucose 5%.</p> <p><u>Final concentration is 2mg/mL</u></p>
Administration	<p>IV Infusion: Infuse over 60-120 minutes</p> <p>IV line must be flushed with 5% glucose before and after the dose</p>
Monitoring	<p>Urine output. Full blood count (FBC) for anaemia and thrombocytopenia</p> <p>Renal function (for elevated creatinine), electrolytes (for hypokalaemia) and liver function (for derangements of liver enzymes).</p> <p>Monitor serum concentrations of concomitant nephrotoxic drugs.</p>
Adverse Reactions	<p>Common: nausea, vomiting, rash, fever, rigors</p> <p>Serious: hypokalaemia, hypomagnesaemia, hypocalcaemia, nephrotoxicity, anaemia, thrombocytopenia</p>
Storage	<p>Vial: Store at room temperature, below 25°C</p> <p>Reconstituted solution: Stable for 24 hours at 2–8°C. Discard unused portion after 24 hours.</p> <p>Do not use the reconstituted solution or infusion if cloudy or a precipitate is present. Protect from light.</p>
Notes	<p>If infusion-related immediate reactions occur (e.g. fever, hypotension), duration of infusion may be increased to 3–4 hours.</p> <p>Liposomal amphotericin B is considered to be at a lower risk of causing harm if extravasated (as compared to amphotericin B – conventional).</p> <p>If total parenteral nutrition (TPN) or IV fluids are turned off during the infusion, consider monitoring of blood glucose.</p> <p>Cerebrospinal fluid (CSF) penetration of lipid formulations of amphotericin B is poor.</p> <p>Ensure adequate hydration</p>

References	<p>Ainsworth SB. Neonatal formulary 7: drug use in pregnancy and the first year of life. Seventh ed. Chichester (West Sussex): John Wiley & Sons Inc.; 2015. p140</p> <p>Takemoto CK, Hodding JH, Kraus DM. Pediatric & neonatal dosage handbook with international trade names index: a universal resource for clinicians treating pediatric and neonatal patients. 24th ed. Hudson (Ohio): Lexicomp; 2401. 2, p141-142.</p> <p>Truven Health Analytics. Amphotericin Liposomal. In: NeoFax [Internet]. Greenwood Village (CO): Truven Health Analytics; 2019 [cited 2019 Sept10]. Available from: https://neofax.micromedexsolutions.com/</p> <p>Society of Hospital Pharmacists of Australia. Amphotericin Liposomal. In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2019 [cited 2019 Sept10]. Available from: http://aidh.hcn.com.au</p> <p>Lilley L, Legge D. Paediatric injectable guidelines. 5th ed. Melbourne (Victoria): The Royal Children's Hospital; 2019.</p> <p>Paediatric Formulary Committee. BNF for Children: 2017. London: BMJ Group Pharmaceutical Press; 2017</p>
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