**Erythromycin:**

**Class:** Antibiotic.

**Indications:**

Treatment of susceptible bacterial infections including *S. pyogenes*, some *S. pneumoniae*, some *S. aureus*, *M. pneumoniae*, *Legionella pneumophila*, diphtheria, pertussis, *Chlamydia*, erythrasma, *N. gonorrhoeae*, *E. histolytica*, syphilis and nongonococcal urethritis, and *Campylobacter* gastroenteritis; used in conjunction with neomycin for decontaminating the bowel.

**Available dosage form in the hospital:** 0.3% EYE OINTMENT, 0.5% EYE OINTMENT, 200MG/5 ML SUSP, 500MG TAB, 250MG TAB( ethyl succinate), 2% LOTION, 2% OINTMENT.

**Trade Names:**

**Dosage:**

-Usual dosage range:
  - **Oral:**
    - Base: 250-500 mg every 6-12 hours; maximum: 4 g daily
    - Ethylsuccinate: 400-800 mg every 6-12 hours; maximum: 4 g daily
  - **I.V.:** Lactobionate: 15-20 mg/kg/day divided every 6 hours or 500 mg to 1 g every 6 hours, or given as a continuous infusion over 24 hours; maximum: 4 g daily

-Indication-specific dosing:
  - **Bartonella** spp infections (bacillary angiomatosis [BA], peliosis hepatis [PH])
    (unlabeled use): Oral: 500 mg (base) 4 times daily for 3 months (BA) or 4 months (PH) (Koehler, 1992; Rolain, 2004; Stevens, 2005; Tappero, 1993)
  - **Chancroid** (unlabeled use): Oral: 500 mg (base) 3 times daily for 7 days; Note: Not a preferred agent; isolates with intermediate resistance have been documented (CDC, 2010)
  - **Gastroparesis** (unlabeled use):
    - I.V.: 3 mg/kg administered over 45 minutes every 8 hours (Camilleri, 2013)
    - Oral: Patients refractory/intolerant to other prokinetic agents (eg, metoclopramide, domperidone): 250-500 mg (base) 3 times daily before meals. Limit duration of therapy, tachyphylaxis may occur after 4 weeks (Camilleri, 2013).
  - **Granuloma inguinale** (donovanosis) (unlabeled use): Oral: 500 mg (base) 4 times daily for 21 days (CDC, 2010)
-Legionnaires’ disease: Oral: 1.6–4 g (ethylsuccinate) daily or 1–4 g (base) daily in divided doses for 21 days. **Note:** No longer preferred therapy and only used in nonhospitalized patients.

-Lymphogranuloma venereum: Oral: 500 mg (base) 4 times daily for 21 days; **Note:** Preferred therapy for pregnant or lactating women (CDC, 2010)

-Nongonococcal urethritis (including coinfection with *C. trachomatis*): Oral: 500 mg (base) 4 times daily for 7 days or 800 mg (ethylsuccinate) 4 times daily for 7 days. **Note:** May use 250 mg (base) or 400 mg (ethylsuccinate) 4 times daily for 14 days if gastrointestinal intolerance.

-Pertussis: Oral: 500 mg (base) every 6 hours for 14 days

-Preop bowel preparation: Oral: 1 g erythromycin base at 1, 2, and 11 PM on the day before surgery combined with mechanical cleansing of the large intestine and oral neomycin.

**Renal Impairment:**
Slightly dialyzable (5% to 20%); supplemental dose is not necessary in hemo- or peritoneal dialysis or in continuous arteriovenous or venovenous hemofiltration.

**Common side effect:** QTc prolongation, torsade de pointes, pruritus, rash, Abdominal pain, anorexia, diarrhea, infantile hypertrophic pyloric stenosis, nausea, vomiting, Cholestatic jaundice (most common with estolate), hepatitis

**Pregnancy Risk Factor:** B