Chloramphenicol:

Class: Antibiotic.

Indications:

Treatment of serious infections due to organisms resistant to other less toxic antibiotics or when its penetrability into the site of infection is clinically superior to other antibiotics to which the organism is sensitive; useful in infections caused by *Bacteroides*, *H. influenzae*, *Neisseria meningitidis*, *Salmonella*, and *Rickettsia*; active against many vancomycin-resistant enterococci.

Available dosage form in the hospital: 0.5% EYE DROP, 0.5% EYE OINT, 1G VIAL, 1% EYE OINT.

Trade Names:

Dosage:

Systemic infections: I.V.: 50-100 mg/kg/day in divided doses every 6 hours; maximum daily dose: 4 g/day.

Renal Impairment:

Use with caution; monitor serum concentrations.

Hepatic Impairment:

Use with caution; monitor serum concentrations.

Common side effect:

Central nervous system: Confusion, delirium, depression, fever, headache

Dermatologic: Angioedema, rash, urticaria

Gastrointestinal: Diarrhea, enterocolitis, glossitis, nausea, stomatitis, vomiting

Hematologic: Aplastic anemia, bone marrow suppression, granulocytopenia, hypoplastic

anemia, pancytopenia, thrombocytopenia

Ocular: Optic neuritis

Miscellaneous: Anaphylaxis, hypersensitivity reactions, Gray syndrome

Pregnancy Risk Factor:

Chloramphenicol crosses the placenta producing cord concentrations approaching maternal serum concentrations. An increased risk of teratogenic effects has not been associated with the use of chloramphenicol in pregnancy (Czeizel, 2000; Heinonen, 1977). "Gray Syndrome" has occurred in premature infants and newborns receiving chloramphenicol. The manufacturer recommends caution if used in a pregnant patient near term or during labor. Chloramphenicol may be used for the treatment of Rocky Mountain spotted fever in pregnant women although caution should be used when administration occurs during the third trimester (CDC, 2006).