

Renal Impairment Prescribing Table – ANTIBACTERIALS

Dose adjustments recommended in this table are applicable to the infections detailed on www.antibioticprescribing.ie for the treatment of community infections only. All doses are oral and for adults unless otherwise stated

Use either eGFR or calculated CrCl figure to direct to relevant dosing column in tables below.

| Drug | Stage 3A | Stage 3B | Stage 4 | Stage 5 |
|-------------------------|---|----------|---|--|
| | eGFR (ml/min/1.73m ²) or calculated CrCl (ml/min) | | | |
| | 30 - 50 | | 10 - 30 | |
| Amoxicillin | No adjustment required | | Max. 500mg every 12 hours | Max. 500mg every 24 hours |
| Azithromycin | No adjustment required | | | Use with caution - systemic exposure may be increased 33% |
| Benzylpenicillin | No adjustment required for single stat dose | | | |
| Cefalexin | No adjustment required | | | Max 250mg every 8 hours |
| Cefotaxime | No adjustment required for single stat dose | | | |
| Ceftriaxone | No adjustment required | | | |
| Ciprofloxacin | 500 mg every 12 hours | | 500mg every 24 hours | |
| Clarithromycin | No adjustment required | | Use half normal dose. Contraindicated if severe hepatic impairment also present. | |
| Clindamycin | No adjustment required | | | Use with caution. No adjustment required. |
| Co-amoxiclav | No adjustment required | | 500mg/125 mg every 12 hours | 500mg/125 every 24 hours |
| Co-trimoxazole | No adjustment required | | 15-30: Max. 80mg/400mg every 12 hours | <15: Seek specialist advise for alternative |
| Doxycycline | No adjustment required | | | Use with caution - no adjustment required |
| Flucloxacillin | No adjustment required | | | Consider dose reduction or extension of dose interval In high dose regimens the max. recommended dose is 1 g every 8-12 hours |

| Drug | Stage 3A | Stage 3B | Stage 4 | Stage 5 |
|---|---|--|--|--|
| | eGFR (ml/min/1.73m ²) or calculated CrCl (ml/min) | | | |
| | 30 - 50 | | 10 - 30 | <10 |
| Fosfomycin | No adjustment required | | | Not recommended |
| Levofloxacin 500mg every 12 hours | 20–50: Initial dose 500mg, then 250mg every 12 hours | 10–20: Initial dose 500 mg, then 125 mg every 12 hours | Initial dose 500 mg, then 125 mg every 24 hours | |
| 500mg every 24 hours | 20-50: Initial dose 500mg, then 250mg every 24 hours | <20: Initial dose 500mg, then 125mg every 24 hours | | |
| Lymecycline | No adjustment required | | Seek specialist advice for alternative | |
| Metronidazole | No adjustment required | | | |
| Minocycline | No adjustment required | | | Seek specialist advice for alternative |
| Nitrofurantoin | <p>45-60: Use with caution. Increased risk of treatment failure due to inadequate urine concentration and side effects.</p> <p>< 45: Long-term use contraindicated. May be used with caution if eGFR 30–44 as a short-course (3 to 7 days), to treat uncomplicated lower urinary-tract infection caused by suspected or proven multidrug resistant bacteria if potential benefit outweighs risk.</p> | | Contraindicated | |
| Ofloxacin | 20-50: 200mg every 24 hours | | <20: 200mg every 48 hours | |
| Phenyoxymethylpenicillin | No adjustment required | | | |
| Rifampicin | No adjustment required | | | |
| Spectinomycin | No adjustment required | | | |
| Trimethoprim | No adjustment required | | 15-30: Normal dose for 3 days, then 50% of normal dose <15: 50% of normal dose | 50% of normal dose |