

ORAL VORICONAZOLE PRESCRIBING (Leeds CF Unit)

Patient name:

Start Date:

Confirm not pregnant and discuss contraception? No / NA

- Contra-indications*
- **Rifampicin**, carbamazepine (dec. levels of voriconazole)
 - Sirolimus (inc. sirolimus concentrations)

- Precautions**
- QT interval/Cardiovascular disease
 - Concomitant medications known to prolong QT interval
 - Quinolones e.g. **Ciprofloxacin**
 - Macrolides e.g. **Azithromycin/ Erythromycin/Clarithromycin**
 - Co-trimoxazole
 - Azoles- e.g. fluconazole, ketoconazole
 - **Ciclosporin**- half ciclosporin dose and monitor levels and renal function
 - **Tacrolimus**- reduce dose of tacrolimus to a third of the dose, monitor levels and renal function
 - **Omeprazole**- half omeprazole dose
 - **Benzodiazepines** e.g. midazolam/lorazepam- prolonged sedative effect

- Monitoring*
- Check before and during treatment:**
 K, Mg and Ca before starting treatment (can cause decrease in plasma levels)
 LFT's & bilirubin
 Renal function (esp. creatinine)

Age 2-11 years

200mg bd (regardless of age/weight)

Over 12 years of age

	>40kg	<40kg
Day 1	400mg bd	200mg bd
Day 2+	200mg bd	100mg bd
If no improvement at review	300mg bd	150mg bd

- Inform patient of side-effects (list not exhaustive)**
- Liver/renal toxicity
 - Fever/rash/vomiting/diarrhoea/ headache, abdo.pain
 - Photosensitivity
 - Visual disturbances
 - Stevens-Johnson syndrome

Consult the Summary of Product Characteristics (SmPC) for full details.

Voriconazole Record Sheet

	Start Date	Further Prescriptions				
Date						
Dose						
Length of prescription						
U&Es checked						
LFTs checked						
NOTES						

Voriconazole is considered a '**RED**' drug with LTHT and therefore cannot be prescribed by general practitioners.

At the end of treatment remember to restart ciclosporine/tacrolimus and omeprazole at the original dose and monitor levels where appropriate.