Piperacillin, Tazobactam

【ITAPI】2.25g TAPImycin® 2.25g/Vial *ATC Code：J01CR05*

中文名： 達比黴素注射劑 《永信》

適應症： 對 piperacillin 具有感受性以及對 piperacillin 具抗藥性但對 piperacillin/tazobactam 有感受性之 β-lactamase 產生菌株所引起之中至嚴重程度感染。

成　　分： Each vial contains:
Piperacillin sodium ..... 2 g (potency)
Tazobactam sodium ..... 0.25 g (potency)

藥理分類： Antibiotic, Penicillin. Tazobactam: beta-lactamases inhibitor.

用法用量：**Administration:** Administer by IV infusion over 30 minutes.

Indications and dosage regimen:

Gynecologic & obstetric infections / Intra –abdominal infections / Skin & skin structure infections:

4.5 g every 8 hours for 7-10 days.

Respiratory tract infections:

－Usual, 4.5 g every 6-8 hours for 7-10 days.

－Nosocomial pneumonia:

4.5 g every 6 hours for 7-14 days; used in conjunction with an aminoglycoside.

Dosage for Adults with Renal Impairment:

Clcr(mL/min)	Daily Dosage (except Nosocomial Pneumonia)	Daily Dosage (Nosocomial Pneumonia)
20-40	2.25 g Q6h	3.375 g Q6h
< 20	2.25 g Q8h	2.25 g Q6h
Hemodialysis	2.25 g Q12h; also give 0.75 g after each hemodialysis session	2.25 g Q8h; also give 0.75 g following each hemodialysis session
CAPD patients	2.25 g Q12h	2.25 g Q8h

Pediatric:

General dosing, susceptible infection: Severe infection:

- **Traditional dosing**:
  -Infants <2 months: IV:
  240 to 300 mg piperacillin/kg/day divided in 3 to 4 doses;
  MAX daily dose: 16 g/day.
  -Infants ≥2 months, Children, and Adolescents: IV:
  240 to 300 mg piperacillin/kg/day divided in 3 to 4 doses; maximum daily dose: 16 g/day.
- **Extended infusion dosing:** Limited data available:
  -Children and Adolescents: IV:
  100 mg piperacillin/kg/dose infused over 4 hours every 6 to 8 hours;
  MAX daily dose: 16 g/day.

不良反應： 腹瀉、頭痛、便秘、噁心、失眠、皮膚癢、念珠菌病、血壓異常。

交互作用： 1.本劑禁與 Lactated Ringer's 注射液配伍。
2.本劑若須與 aminoglyside 類抗生素並用時，應分別配製並分別給藥，因為 penicillins 會使 aminoglysides 失效。

注意事項： 對 penicillins、cephalosporins 或 β-lactamase inhibitors 曾有過敏患者禁用本劑。

懷 孕 期： 1.於懷孕婦女使用本藥之安全資料有限。
2.Studies in animals have shown developmental toxicity, but no evidence of teratogenicity, at doses that are maternally toxic.
3.Piperacillin and tazobactam cross the placenta. Piperacillin/Tazobactam should **only be used during pregnancy if clearly indicated,** i.e. only if the expected benefit outweighs the possible risks to the pregnant woman and fetus.

授 乳 期： 1.Piperacillin 會分泌至母乳中；尚未知 tazobactam 是否會分泌至母乳中。授乳婦應小心使用。
2.Piperacillin is excreted in low concentrations in breast milk; tazobactam concentrations in human milk have not been studied.
3. In general, antibiotics that are present in breast milk may cause non-dose-related modification of bowel flora. Monitor infants for GI disturbances, such as thrush and diarrhea (WHO 2002).

調 製： 1.每瓶以 **10**mL 之 NS、D5W 或滅菌注射用水配製，震搖至溶解為止。
2.再以 50~150mL 之 NS、D5W 或滅菌注射用水※進一步稀釋，靜脈輸注給藥時間應超過 30 分鐘。*※滅菌注射用水最多 50mL*

安 定 性： 配製後溶液於室溫下 24 小時，置於冰箱（2-8℃）48 小時。因本劑不含防腐劑，故配製時應使用適當之無菌技術。

相容輸注液： D5W、NS、滅菌注射用水(最多 50mL)。
※本品與 Lactated Ringer's **不相容**。