

This information is provided to facilitate the prescribing and supply of fosfomycin in a Primary Care Setting. For full prescribing information please consult the product SPCs.

Therapeutic indications	<p>Only treat if symptomatic. Do not treat asymptomatic bacteriuria. Send urine culture.</p> <ol style="list-style-type: none"> Lower Urinary Tract Infection (UTI) (\pm catheter) caused by Gram negative organisms with proven susceptibility to Fosfomycin and resistant to all other suitable antibiotics, and where no alternative agent is available. Other conditions as advised by Infection Specialist
Oral Dosing Advice & Length of Treatment	<p>ORAL:</p> <p>Uncomplicated lower UTIs in non-pregnant adult females, or adolescent females aged 12-17 years: One 3g sachet as a one off dose</p> <p>Lower UTI in adult men: One 3g sachet, repeat a further 3g sachet 72 hours later (total of 2 doses per treatment)*</p> <p>Catheter-associated UTI (CAUTI) in non-pregnant adult females and adult men: If catheterised, catheter must be changed or removed. One 3g sachet, repeat a further 3g sachet 72 hours later (total of 2 doses per treatment)*</p> <p>Note: *Lower UTI treatment with the oral preparation in men and CAUTI is not licensed and therefore use in these patients is 'off-label', but is recognised in standard clinical practice. A blanket unlicensed form has been completed for use in NHS Lanarkshire.</p>
Administration:	<p>Dose to be given preferably at night and after bladder emptying. The sachet should be dissolved in water and taken immediately after preparation on an empty stomach (about 2-3 hours before or 2-3 hours after a meal).</p>
Contraindications	<ul style="list-style-type: none"> Known hypersensitivity to fosfomycin or product excipients Contraindicated in Creatinine Clearance (CrCl) < 10ml/min Oral administration not suitable for upper UTI/pyelonephritis
Renal impairment	<p>No adjustment needed for CrCl > 10ml/min. Contraindicated in CrCl < 10ml/min.</p>
Adverse Effects Frequency: <hr/> <i>Very common</i> $\geq 1/10$, <hr/> <i>Common</i> $\geq 1/100$ - <1/10 <hr/> <i>Uncommon</i> $\geq 1/1000$ - <1/100 <hr/> <i>Rare</i> $\geq 1/10,000$ - <1/1000 <hr/> <i>Very rare</i> <1/10,000	<p>See BNF and SPC for full list.</p> <p>ORAL: most common adverse reactions involve the gastrointestinal tract, mainly diarrhoea. These events are usually self-limited in duration and resolve spontaneously.</p> <p>Reporting suspected adverse reactions: Healthcare professionals are asked to report any suspected adverse reactions via the national reporting system website: www.mhra.gov.uk/yellowcard</p>

Interactions	<ul style="list-style-type: none"> • Metoclopramide: Concomitant administration of metoclopramide has been shown to lower serum and urinary concentrations of fosfomycin and should be avoided. Other medicinal products that increase gastrointestinal motility may produce similar effects. • Alterations in INR: Monitor for increased oral anticoagulant activity. • Food effect: Food may delay absorption of oral fosfomycin, with consequent slight decrease in peak plasma levels and urinary concentrations. Therefore, should administer oral fosfomycin on an empty stomach (2–3 hours before or after a meal).
Preparations Available	Oral – Fosfomycin 3g sachet (fosfomycin trometamol)
References	<ol style="list-style-type: none"> 1. Joint Formulary Committee. <i>British National Formulary</i> (online) London: BMJ Group and Pharmaceutical Press. Accessed March 2023 via http://www.medicinescomplete.com 2. Joint Formulary Committee. <i>British National Formulary for Children</i> (online) London: BMJ Group and Pharmaceutical Press. Accessed April 2023 via http://www.medicinescomplete.com 3. Zambon UK Limited. Summary of Product Characteristics – Monuril™ 3g granules for oral solution. Accessed from: https://www.medicines.org.uk/emc/product/7329/smpc [last updated June 2021]
Further advice	Further guidance can be obtained from Infection Specialists or antimicrobial pharmacists.