

CLINICAL GUIDELINE

Oral Metronidazole, promoting appropriate use

A guideline is intended to assist healthcare professionals in the choice of disease-specific treatments.

Clinical judgement should be exercised on the applicability of any guideline, influenced by individual patient characteristics. Clinicians should be mindful of the potential for harmful polypharmacy and increased susceptibility to adverse drug reactions in patients with multiple morbidities or frailty.

If, after discussion with the patient or carer, there are good reasons for not following a guideline, it is good practice to record these and communicate them to others involved in the care of the patient.

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Important Note:

The Intranet version of this document is the only version that is maintained.

Any printed copies should therefore be viewed as 'Uncontrolled' and as such, may not necessarily contain the latest updates and amendments.

THINK before you prescribe or administer **IV** METRONIDAZOLE could my patient have **ORAL** THERAPY?



Metronidazole has excellent **ORAL** bioavailability reaching **95-100%**

If your **PATIENT** meets the following criteria:



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- \checkmark Oral route reliably available
- \checkmark Gut absorption not compromised
- \checkmark No clinical deterioration/ systemic sepsis

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Consider SWITCH from IV to ORAL metronidazole– GO GREEN! ADVANTAGES of the ORAL route:

- \checkmark Improved antimicrobial stewardship
- \checkmark Reduced patient risk of IV line infections & thrombophlebitis
- More patient friendly: improved comfort & mobility
- ✓ Reduced nursing & medical workload
- **Reduced cost-IV route 27 times more expensive than tablets**
- \checkmark Improved sustainability & reduced plastic waste

For further advice on **IV** to **ORAL** antibiotic **SWITCH** options see NHSGGC **IVO**ST policy

