

POAC REFERRAL PROCESS

Funding of oral treatments for cystitis caused by multi-resistant bacteria

Patient presents to GP with ESBL positive/Multi-resistant cystitis*

*neither of the options are recommended for treatment of pyelonephritis

GP phones Infectious Disease Consultant or Clinical Microbiologist

ID does not approve use of these agents and suggests alternative medication

Infectious Disease Consultant (on call)

ADHB (09) 367 2800
CMDHB 021-837-253
WDHB (09) 486 8908

Labtests Microbiologists

Contact the community microbiologists via Labtests switchboard (09) 5747200

ID recommends prescribing pivmecillinam or fosfomycin

HOSPITAL PHARMACY CONTACT

Auckland City Hospital

Ph (09) 307 8997
Email achretail@adhb.govt.nz

Middlemore Hospital

Ph (09) 276 0016 (opt 1)

Email

pharmacyprocurement@middlemore.co.nz

North Shore Hospital

Ph (09) 486 8333

Email

nshoutphcy.generic@waitemata.dhb.govt.nz

Waitakere Hospital

Ph (09) 837 9199

Email

wthoutphcy.generic@waitamata.dhb.govt.nz

Initiate a POAC referral in the usual manner (POAC funds the cost of pivmecillinam or fosfomycin and admin fee only)

UroFos is available for wholesale purchase by community pharmacies.

Contact directly
Te Arai Biofarm
0800 832 724

See full product details [here](#)

Prepare prescription for pivmecillinam or fosfomycin as recommended by ID/Microbiologist

Script must contain POAC Case Number and the name of the consultant who has endorsed

Direct patient to the appropriate hospital outpatient pharmacy to collect. If taxi delivery required, phone POAC

CONTACT POAC

Phone (09) 535 7218
Email info@poac.co.nz
www.poac.co.nz

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Information for GPs

Multi-resistant organisms are an increasing problem in NZ, particularly in the Auckland area.

Oral *pivmecillinam* and *fosfomycin trometamol* are indicated in the treatment of cystitis due to a Gram negative organism that is resistant to commonly prescribed oral antibiotics. For example, oral *fosfomycin* has been used to treat uncomplicated ESBL positive *E. coli* and *Klebsiella spp.* cystitis in primary care thus avoiding an acute hospital admission for IV antibiotics. Gram negative bacilli expected to be resistant to these agents include *Morganella*, *Acinetobacter* and *Stenotrophomonas*.

These agents are not useful in patients with pyelonephritis because they do not achieve effective levels in the blood or tissue and therefore will not cure kidney infection.

Pivmecillinam and fosfomycin are not licensed or funded in NZ but are available from MMH, ACH and NSH outpatient pharmacies.

POAC will pay:

- the full amount of the drug that would normally be charged to the patient
- a POAC administration fee

Pivmecillinam dosing: 400mg stat dose, followed by 200mg TDS for 3 days (10 x 200mg tablets).

Fosfomycin dosing: 3g stat dose which may be repeated on day 4 on ID advice. Each sachet should be dissolved in approx. half a cup of cool water or juice.

Both agents are well tolerated and have a low incidence of harmful side-effects. However, development of bacterial resistance under therapy may occur which makes them unsuitable for sustained monotherapy of severe infections.

Pre-requisites

Consultant recommendation: endorsement must be obtained from either an Infectious Diseases Consultant or Clinical Microbiologist at MMH, ACH, NSH, or Labtests.

Drug collection: the drug must be collected from MMH, ACH, NSH or WTK hospital pharmacy

POAC Case No: the patient must be provided with a prescription which includes the POAC case number and name of recommending Consultant.

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