

Inhaling colistimethate sodium antibiotic to treat your lung infection

Department of Respiratory

Information for Patients

Produced: July 2021

Review: July 2024

Leaflet number: 1201 Version: 1

Introduction

This leaflet contains important information for patients that have been prescribed colistimethate sodium to manage long term infections in the lungs.

Why have I been prescribed colistimethate sodium?

Colistimethate sodium is an antibiotic that can be nebulized. A nebulizer turns medicines in to a fine mist which can be inhaled into the lungs. Colistimethate sodium is used for long-term management of chest infections caused by a bacteria called **Pseudomonas aeruginosa**. Pseudomonas is a type of bacteria which are found in the environment that live in damp, wet areas. It can damage the lungs if left uncontrolled.

Regular use of colistimethate sodium can lower the amount of bacteria in the lungs. The aim is to reduce the number of chest infections.

Your consultant has prescribed colistimethate sodium for you

Mega units = Bottles

To be nebulized 2 times a day.

What are the side effects?

Tight chest (bronchospasm) is a very rare side effect. If you have this please tell your nurse, pharmacist or doctor.

They will then try the alternative of mixing colistimethate sodium with water (2mls) and sodium chloride (2mls).

Using a salbutamol inhaler before taking colistimethate sodium may help.

**Health information and support is available at www.nhs.uk
or call 111 for non-emergency medical advice**

Visit www.leicestershospitals.nhs.uk for maps and information about visiting Leicester's Hospitals
To give feedback about this information sheet, contact InformationForPatients@uhl-tr.nhs.uk

Mixing colistimethate sodium

Colistimethate sodium should be diluted to 4 mls with saline solution (sodium chloride 0.9%).

1 mega unit = 1 bottle –add 4 mls.

2 mega unit = 1 bottle—add 4mls.

If you have a tight chest whilst nebulizing, colistimethate sodium can be made up with 2 ml saline solution and 2 ml sterile water. This can be started and prescribed at the hospital.

We will teach you how to mix the antibiotic and then give a trial dose here in the hospital.

How to mix colistimethate sodium

1. Wash your hands with warm soapy water and dry
2. Flip off the cap of the bottle and carefully remove the seal from around the top.
3. Remove the rubber bung.
4. Twist the top of the saline/ water (as prescribed) and add to the colistimethate sodium (as directed).
5. Make sure that the powder has dissolved add to the nebulizer chamber.
6. Colistimethate sodium should be nebulized with a mouthpiece. Relaxed breathing through the mouth and not the nose is best.
7. Always nebulize in a well ventilated room. Other people and pets should not be in the room whilst using the nebulizer.

Treatment order

1. Take your reliever e.g. salbutamol (if prescribed).
2. Chest physiotherapy.
3. Colistimethate sodium.

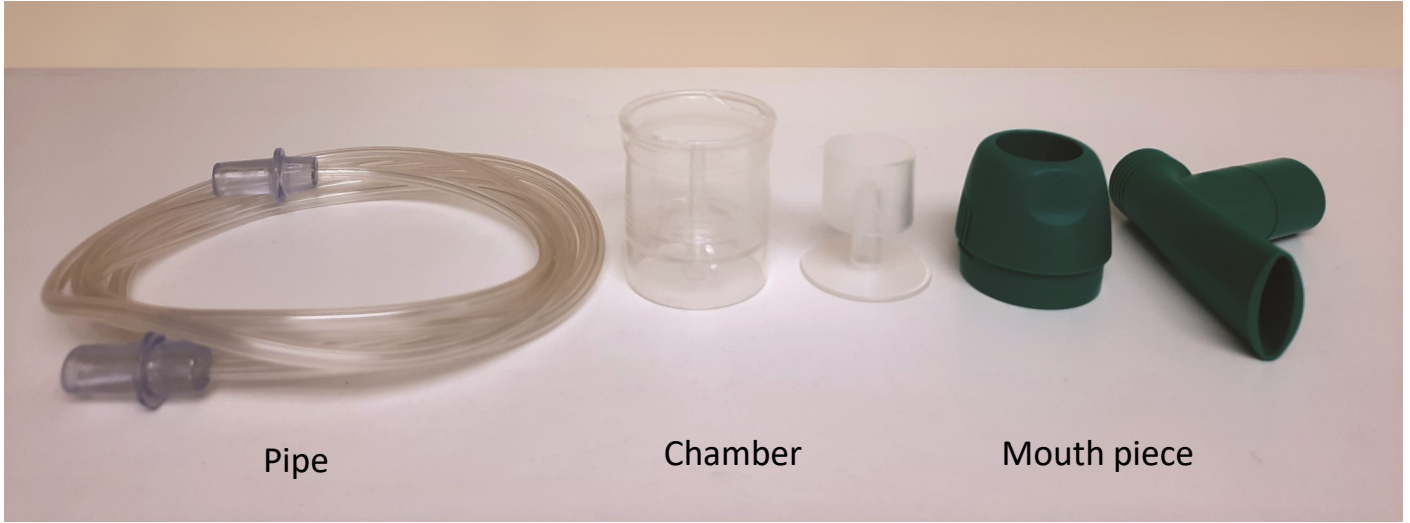
Before colistimethate sodium is prescribed you will be given a ‘test dose’ at the hospital , however, should any problems occur during the first 4 weeks please tell a member of the team.

If 2 weeks after starting treatment it is working well, speak to your nurse who can let your GP know about your treatment. Repeat prescriptions can then be ordered.

Care of the equipment

- After each use the nebulizer chamber, t-piece and mouth piece (not the pipe) should be taken apart and washed in hot soapy water, rinsed in hot clean water and left to dry naturally. Once dry it should be covered to protect from dust.
- Once a week, the chamber and mouth piece must be sterilized with Milton or similar sterilizing solution but not the pipe. After making up the solution immerse the parts for about 20 minutes. Rinse carefully in running water and leave to dry naturally.

- The compressor should be serviced yearly at the respiratory physiology department, Glenfield hospital. The service only takes a few minutes to be done on the day you bring it in.



How to get more supplies

Colistimethate sodium and saline/water will be available on repeat prescription from your GP.

Nebulizer chamber, filters, tubing, t-piece and mouth piece should be obtained from Glenfield Hospital unless told otherwise.

Follow up checks

Follow up will be in the routine respiratory clinics.

Contact details

Bronchiectasis Nurses: 0116 256 3201

Cystic Fibrosis Nurses: 0116 250 2699

Mon to Fri 8am to 5pm

اگر آپ کو یہ معلومات کسی اور زبان میں درکار ہیں، تو براہ کرم مندرجہ ذیل نمبر پر ٹیلی فون کریں۔
على هذه المعلومات بلغة أخرى، الرجاء الاتصال على رقم الهاتف الذي يظهر في الأسفل

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Aby uzyskać informacje w innym języku, proszę zadzwonić pod podany niżej numer telefonu

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