Making the switch
Changing from intravenous to oral antibiotics

Why do we give your child IV antibiotics?

Antibiotics are medicines used to treat infections caused by bacteria, and these infections are commonly seen in patients needing treatment in hospital. To manage serious bacterial infections, antibiotics are often given intravenously or "IV" (meaning through the vein via a drip) initially. This is an effective way to get antibiotics into the blood system quickly, and reach the site of infection. Intravenous antibiotics may also be used if:

- It is not possible or difficult to give antibiotics by mouth (e.g. difficulty swallowing)
- There are problems absorbing medicines from the stomach (e.g. vomiting)
- There are no antibiotics available that can be given by mouth for a particular infection

What you need to know before your child goes home

If your child has been given oral antibiotics to continue at home, it is important that you follow the doctor’s advice on when, how, and for how long to give them. Use the following checklist to make sure you have the information needed to continue antibiotics safely and confidently at home:

Check list

- Name of the antibiotic
- How much of the antibiotic to give your child (make sure you use a metric measure or plastic syringe to measure liquid medicines)
- The times of day you need to give the antibiotic to your child
- Whether the antibiotic needs to be given on an empty stomach, or with food
- How long to give the antibiotic for
- What to do if your child has a reaction or experiences side effects from the antibiotic
- What to do if your child’s condition worsens
- Who should you contact if you’ve gone home and you’re worried about your child
- When you need to see your doctor for follow up

The Sydney Children’s Hospitals Network acknowledges the staff of the Clinical Excellence Commission who have partnered with us on this publication.
When is it safe to switch to oral antibiotics?

In many common infections treated in hospitals, patients can, and should be, safely switched from intravenous to oral antibiotics once:

- Stable and improving (e.g. body temperature is improving or back to normal)
- Other medicines can be taken by mouth without problems
- There are no problems with absorbing medicines taken by mouth
- The antibiotic needed is available in an oral form, in most cases this will be a syrup. If a syrup formulation is not available, tablets or capsules may be prescribed for your child and your doctor, nurse or pharmacist can advise you how to administer this (e.g. crush tablet, dissolve in water) or teach your child how to swallow tablets and capsules whole.
- The patient is likely to be able to take the medicine regularly, as prescribed
- The family understands the plan to change the patient to an oral antibiotic and is able to assist where required

Your child’s doctor will reassess the need for intravenous antibiotic therapy every day, and may involve you in these discussions. Please feel free to ask more questions if you have concerns about your child’s antibiotic therapy.

Why should we switch to oral antibiotics?

Giving medicines by mouth (orally) is the safest and most convenient way to take most medicines, and every effort is made to switch patients to oral medicines as soon as possible.

Benefits of giving medicines orally include:

- No need for an intravenous line or drip
- More comfortable for children and young people
- Less risk of complications like irritation or infection from the line or drip
- Can often go home sooner
- Generally, serious side effects from oral antibiotics are less common

Risks include:

A small chance the infection may get worse if oral antibiotics are not sufficient to treat the infection. If this happens, your child may be restarted on intravenous antibiotics (which may involve putting in a new intravenous cannula or drip) or, if you have already gone home, you may need to return to the hospital for intravenous antibiotics.

Doctors, nurses and pharmacists use special criteria and checklists to help them make the right decisions about when it is safe and suitable to switch to oral antibiotics.

What are the side effects of antibiotic therapy?

Antibiotics have the potential to cause side effects, however, when antibiotics are necessary, the benefits far outweigh the risks. Common side effects of taking antibiotics include stomach problems like diarrhoea, nausea and vomiting. Taking antibiotics, intravenously or orally, can affect the normal good gut bacteria. For some children, probiotics may help to restore good gut bacteria; speak to your doctor for more information.

Less common but more serious side effects of taking antibiotics are allergic reactions, such as hives (large, red, raised areas on the skin), fever and breathing problems. If your child experiences any of these, stop taking the antibiotic and seek medical attention. The Consumer Medicine Information (CMI) for the prescribed medicine also lists the most common side effects.

You are part of the team making this decision

At this hospital, we encourage staff to provide parents and carers with information on antibiotics prescribed for their child, including when and why it has been started, potential side effects of the antibiotic, the treatment plan and options so you can help make decisions about your child’s treatment. If you have not been involved in these discussions, and wish to know more about your child’s antibiotic treatment plan, please ask your hospital doctor, nurse or pharmacist.