USE OF ERYTHROMYCIN AS PROKINETIC IN CRITICALLY HOSPITALISED PATIENTS

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BACKGROUND AND IMPORTANCE
Critically patients sometimes suffer from gastrointestinal disorders which are necessary to treat to improve clinical outcomes. Erythromycin is an antibiotic with prokinetic activity due to its agonist activity on motilin receptors, accelerating gastric emptying.

AIM AND OBJECTIVES
To evaluate the efficacy of intravenous erythromycin as a prokinetic in critically ill hospitalized patients.

MATERIAL AND METHODS
- Retrospective observational study (April 2021- March 2022)
- Critically ill patients
- Software used: Farmasyst® and Orion Clinic®

RESULTS
- N = 39 patients
- 64% men and 36% women
- Mean age: 64 years
- Average weight: 71 kg
- 85% in surgical intensive care

Erythromycin 250 milligrams every 8 hours
- Average of 5 days of treatment

Diagnoses to prescribe erythromycin
- Upper gastrointestinal bleeding: 2
- Intolerance to enteral nutrition: 6
- Absent peristalsis: 18
- Weak peristalsis: 13

ENDING OF TREATMENT
- Death
- Resolution of abdominal distension, auscultation of peristalsis and presence of stool
- Tolerance to enteral nutrition

CONCLUSIONS
The use of erythromycin as a prokinetic in the population evaluated has been shown to be effective in improving intestinal motility. There was no difference between groups which were administered metoclopramide or not before or during the treatment with erythromycin. Given the variability observed, in terms of duration, concomitant prokinetics or indication, there is a need to establish a protocol for the use of erythromycin as a prokinetic.

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