

- Following a trial period of nebulised colomycin/colistin you may be switched to Promixin which is a brand name for colomycin/colistin. This prescription includes a hand held nebuliser device which is provided by the company that makes Promixin. The company provides training about how to use and clean their equipment. Please discuss this with your respiratory nurse.

Further supplies:

Colomycin/colistin and water should be obtained from your GP. Nebuliser chamber, tubing and mouth pieces should be obtained from your hospital respiratory nurse unless advised otherwise.

Side effects:

Very rarely Bronchospasm (tight Chest)

If you experience this please inform your nurse, pharmacist or doctor. Using a Salbutamol or Terbutaline inhaler before colomycin/colistin may help.

Please read this leaflet in conjunction with the medicine pack insert.

References

If you require a full list of references for this leaflet please email patient.information@ulh.nhs.uk

The Trust endeavours to ensure that the information given here is accurate and impartial.



If you require this information in another language, large print, audio (CD or tape) or braille please email the Patient Information team at patient.information@ulh.nhs.uk

Nebulised Colomycin/Colistin

Respiratory Nurses

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Aim of the leaflet

This leaflet is aimed at patients who have bronchiectasis and have just been prescribed colomycin/colistin to nebulise. This treatment will have been prescribed by your respiratory consultant to reduce the number of bacteria in your sputum.

With regular use colomycin/colistin can reduce the amount of pseudomonas aeruginosa in the lung with the aim of reducing the frequency of chest infections.

Why have I been prescribed colomycin/colistin?

Colomycin/colistin is an antibiotic that can be nebulised; it is used for the long-term management of an infection in the lungs called *Pseudomonas aeruginosa*.

Your consultant has prescribed for you:

Colomycin/colistin mega units = (bottles)

To be nebulised twice a day

Mixing:

Colomycin/colistin should be diluted to a total of 4mls with saline or water as this is the optimum volume for nebulising.

- 1 mega unit = 1 bottle - add 4 mls
- 2 mega unit = 2 bottles - add 2mls to each bottle
- (If dispensed 2-mega unit bottles add 4mls of saline/water)

If you experience a tight chest whilst nebulising try using a bronchodilator before the colomycin/colistin.

How to mix:

1. Flip the plastic seal off the bottle and carefully remove the seal from around the top. Remove the rubber bung.
2. Twist the top of the water (as prescribed) and add to the colomycin/colistin (as directed).
3. Making sure that the powder has dissolved, add the solution to the nebuliser chamber.
4. Colomycin/colistin should be nebulised with a mouthpiece. Relaxed breathing through the mouth and not the nose is ideal.
5. Always nebulise in a well ventilated room.

Treatment order:

1. Inhaled bronchodilator (reliever treatment) eg; salbutamol or terbutaline (if prescribed).
2. Chest physiotherapy or chest clearance exercises.
3. Other inhaled drugs.
4. Colomycin/colistin via nebuliser.

Before colomycin/colistin is prescribed you will be given a 'test dose' at the hospital to monitor for adverse reactions.

Care of equipment:

- After each use the nebuliser chamber and mouthpiece should be dismantled and washed in hot soapy water. Then rinsed in clean hot water and left to dry naturally, preferably covered to protect from dust.
- Once a week it is necessary to sterilise these parts with Milton or a similar sterilising solution. After making up the solution immerse the parts for approximately 20 minutes. Rinse carefully in running water and leave to dry naturally.
- The compressor should be serviced yearly. Your respiratory nurse at the hospital can arrange this for you.