

**06. Haematological, oncologists and immunocompromised patients.**

Indication	Therapy	Dose	Duration therapy	Remarks
<b>Fever with negative screening culture for multiresistant bacterias</b>				
Standard Selective Digestive Decontamination (SDD)	Amoxicilin-Clavulanic Acid + Gentamicine or Ceftazidime + Gentamicine	1200 mg six-hourly intervals iv + 5 mg/kg 24 hourly intervals iv 2000 mg six-hourly intervals iv - 5 mg/kg 24 hourly intervals iv		Maximun 3 days - - - Maximun 3 days
Standard SDD + Benzylpeniciline	Amoxicilin-Clavulanic Acid + Gentamicine	1200 mg six-hourly intervals iv + 5 mg/kg 24 hourly intervals iv		Stop Benzylpeniciline
Standard SDD + Cefazoline	Amoxicilin-Clavulanic Acid + Gentamicine	1200 mg six-hourly intervals iv + 5 mg/kg 24 hourly intervals iv		
In the above types SDD and / or: renal dysfunction in use cisplatin or cyclosporine	Meropenen + Amoxicilin	1000 mg 8-hourly intervals 6 hourly intervals		Stop benzylpeniciline or cefazoline
Standard SDD + Vancomycine	Meropenen in Sepsis: Imipenem-Cilastine	1000 mg 8-hourly intervals 2000 mg 8-hourly intervals		No stop vancomycine
<b>Persistant fever, empiric therapy and negative screening culture for multiresistant bacterias</b>				
Consider starting antifungal therapy				See chapter 16
<b>Fever with positive screening culture for multiresistant bacterias</b>				
Therapy individually in consultation with physician-microbiologist				
When suspected herpes infection (HSV or VZV)	If oral therapy is possible: Valaciclovir If IV therapy is necessary: Aciclovir	1000 mg 8-hourly intervals 10 mg/kg 8-hourly intervals IV		Consider to start antiviral therapy