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MEMORANDUM

TO: Hospital Preparedness Program Participants
Local Health Department, Public Health Emergency Preparedness Participants

FROM: Carla N. Little, Ph.D.
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Office of Preparedness & Response Emergency Medical Countermeasures Program Manager

DATE: February 10, 2015

SUBJECT: Guidance on the Stockpiling of Certain Antibiotics for a Mass Prophylaxis Event

Based on changes in the Centers for Disease Control and Prevention (CDC) Division of Strategic National Stockpile (DSNS) inventory practices, the Illinois Department of Public Health Office of Preparedness and Response Emergency Medical Countermeasure Program is advising that hospitals participating in the Department of Health and Human Services (DHHS) Assistant Secretary for Preparedness Hospital Preparedness Program's (ASPR HPP) Cooperative Agreement and Local Health Departments participating in the CDC's Public Health Emergency Preparedness Cooperative Agreement consider stockpiling Doxycycline and Ciprofloxacin at a 50:50 ratio, and continue to stockpile Amoxicillin at a quantity of 10% to that of the total for Doxycycline and Ciprofloxacin.

Why is the Strategic National Stockpile changing the ratio of its holdings of the antimicrobials Doxycycline and Ciprofloxacin?

The Strategic National Stockpile formulary undergoes continuous review and is subject to change based on the most current information available.

The initial ratio of antimicrobial holdings in the SNS formulary was 80% Doxycycline and 20% Ciprofloxacin. The principal driver at the time was cost, as Ciprofloxacin was not available in generic formulations. The modest cache of Ciprofloxacin was to ensure an alternative drug would be available for persons with contraindications and the possibility that a potential biological agent may be resistant to Doxycycline.

As holdings have matured and the need has arisen to procure replacement antimicrobials, subject matter experts, at DHHS and the CDC, agreed that due to the possibility of drug resistance to either Doxycycline or

Ciprofloxacin, that it would be better to diversify the antimicrobial holdings within the Strategic National Stockpile. It was agreed that a balanced ratio (50/50) of both drugs would ensure greater availability of a secondary antimicrobial in the event a particular agent was resistant to one antimicrobial over another.

Developing and Maintaining A Local Cache

Hospitals are required, per the ASPR HPP Cooperative Agreement, to maintain a 72-hour cache of antibiotics for mass prophylaxis of patients, employees, and their family members.

Maintaining a 72-hour cache for staff and their families is optional for the local health departments. PHEP funding can be used for this purpose.

When stockpiling the capsules and tablets, unit dose configuration is preferred to enhance dissemination to individual patients.

Suggested Formulary for Doxycycline

- Doxycycline hyclate- 100 mg caps/tabs
- Doxycycline monohydrate- 100 mg oral caps/tabs
- Doxycycline 25 mg/ml suspension, supplied as dry powder in a 60 ml bottle
- Doxycycline (Vibramycin) 50 mg/ml syrup in a 473 ml bottle
- And any other formulation of Doxycycline that has been approved by the FDA for post- exposure prophylaxis to reduce the incidence or progression of disease, including inhalation anthrax, following exposure to aerosolized *B. anthracis*.

Suggested Formulary for Ciprofloxacin

- 100 mg tablets
- 250 mg tablets
- 500 mg tablets
- Oral suspension

Suggested Formulary for Amoxicillin

- 500 mg capsules
- Oral suspension

Dosing:

Patient Category	Therapy Recommendation
Adults	<p>Doxycycline, 100 mg PO BID</p> <p>or</p> <p>Ciprofloxacin, 500 mg PO BID</p>
Children	<p>Ciprofloxacin,</p> <p>>3.2kg (7lbs): 15 mg/kg PO BID, max 500 mg/dose</p> <p>< 3.2 kg (7lbs): 10-13 mg/kg/dose</p> <p>or</p> <p>Doxycycline:</p> <p>>39 kg: 100 mg PO BID</p> <p>≤39 kg: 2.2 mg/kg PO BID</p> <p>***** If susceptibility to penicillin has been confirmed: Amoxicillin:</p> <p>>20 kg: 500 mg PO TID</p>
Pregnant women	<p>Doxycycline, 100 mg PO BID</p> <p>or</p> <p>Ciprofloxacin, 500 mg PO BID</p> <p>***** If susceptibility to penicillin has been confirmed: Amoxicillin 500 mg PO TID</p>

Immunocompromised	Doxycycline, 100 mg PO BID or Ciprofloxacin, 500 mg PO BID
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It is recommended to stock a sufficient amount of suspension to provide 72-hours of medication for the pediatric population supported by each cache. If unable to obtain a sufficient supply of suspension, see attached guidance (Exhibits 3 & 4) for preparing Doxycycline formulations for children and adults who cannot swallow tablets/capsules (note: these directions are to utilize Doxycycline tablets, not capsules). This information should be dispensed along with Doxycycline tablets if suspension is not available. The U.S. Food and Drug Administration does not currently have sufficient information to consider issuing optimal home preparation instructions for ciprofloxacin.

Final selection of the specific formularies of each antibiotic to be included in the local cache should be decided by the local medical experts based on the specific needs and demographics of the agency's patient population, staff and their families.

If you have questions and/or comments/feedback on this guidance or any other Medical Countermeasures topics, please contact:

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Attachments