

CURRENT VIEW ON A CHOICE OF ANTIBIOTIC IN INFECTIOUS EXACERBATION OF COPD

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Abstract

Ministry of health order # 128 dated 19.03.2007 recommends for treatment of infectious exacerbation of COPD to use antibiotics of three groups – beta-lactams, macrolides, fluoroquinolones. Antibiotics are mostly effective in type 1 exacerbation of COPD. Amoxicillin or macrolides (first of all clarithromycin) are antibiotics of choice in management of non-severe COPD patients. Macrolides are effective against a major respiratory pathogens, have favorable pharmacokinetics profile (achieve high concentrations in sputum, lung tissues, accumulated in alveolar macrophages), well tolerated and convenient in use. Additional features of macrolides are immunomodulating and anti-inflammatory effects. When first line therapy fails the respiratory fluoroquinolones should be used (levofloxacin, moxifloxacin).

In cases of infectious exacerbation of severe COPD and risk of *P. aeruginosa* colonization a ciprofloxacin should be administered. It has powerful effect against this microorganism (*P. aeruginosa* in most susceptible to ciprofloxacin in comparison with other fluoroquinolones). Other options are the use of levofloxacin or antipseudomonal cephalosporins.

Key words: chronic obstructive pulmonary disease, infectious exacerbation, clarithromycin, ciprofloxacin.

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