

SPEAKER: If you want to start this medication for your patient, what do you need to do? First, you need to communicate with patient in detail about risks, benefits, and options. And whenever you are talking about benefits, make sure emphasize to your patient that this medication does have lower risk side effects, and also, higher safety profile, compared to injectable.

And second thing is you need to talk about potential risks. One, like other aminoglycosides, amikacin can cause ototoxicity and hearing loss. This is not the higher number that you have in amikacin, but still is potential side effects. You need to talk about blood, and also, you need to talk about short-term side effects in the lungs.

What I mean of it. So if you are start treatment for the patient, remember, always use bronchodilator inhaler before amikacin. This is what where I do. I recommend for my patient to use albuterol 30 minutes before starting amikacin. And that there is some idea behind of it. One, in some people, bronchospasm going to happen, that you already prevent of it.

Second thing is, you are opening all your small bronchi and that going to help you to get antibiotics in really deep lower part of the lungs. Third things that usually I would recommend for the patient, washing mouth after every single use. And that is another important.

Remember that any type of inhaler can cause glossitis, is inflammation in tongue and also in mouth. And also, some people maybe they lose voice, and that is concerning for them. Washing mouth can decrease that. And also they are not just getting more medication after using inhaler.

Another thing that I discuss with my patient before starting medication is cleaning the device. So whenever that you start liposomal amikacin, the company going to deliver a device that is very cool and very sophisticated, with ultrasonic going to clean entire your inhaler. And that is something that you need to teach to your patient.

So I have a nurse practitioner with me. Going to go over all those details, and going to discuss with the patient that what should be done if any system makes error in that device, and how we can fix it. And always there is support out there by company that help you to understand better using of this device.

Another thing is important. Rarely reported that lipid pneumonia can happen with liposomal amikacin. Remember that this is lipid that you are getting inside the lung. Rarely can cause lipid pneumonia. So that should be a consideration, and all this should be discussed with patient, too.

Rare side effects that I've seen with this medication is complaining of pain, that I'm not sure is related to the disease, and sometimes about shortness of breath. That, that could be a reaction to the killing bacteria, could be a reaction to others, or many other reasons that maybe I am not aware of. But that is rarely I can hear from my patients.

Oh, beside of that, I do hearing tests for every single patient that I start. I do CBC and also kidney function for those patient I start liposomal amikacin, as well. Generally, many are my patient can tolerate this medication well and they are happy with treatment.