Daptomycin

**Antibiotic Class:**
Lipopeptide

**Antimicrobial Spectrum:**
Gram-positive bacteria.

**Mechanism of Action:**
Calcium-dependent binding/insertion of the lipophillic tail into gram-positive cytoplasmic membrane. Oligomerization/channel formation occurs with subsequent ion leakage and collapse of organism leading to cell death. (Figure 2)

**Pharmacodynamics:**
AUC/MIC ratio predictive of pharmacodynamic activity.

**Pharmacokinetics:** (4mg/kg dose)
- Cmax: 77.5mg/L; Half-life: 8 hours; Volume of distribution: 7L; Clearance (total): 8ml/h/kg

**Adverse Effects:**
The most common adverse effects from this study were constipation (6.2%), nausea (5.8%), injection site reaction (5.8%) and headache (5.4%).

**Dosage:**
Intravenous only – available as 500 mg vials (powder for reconstitution)

Complicated skin and soft tissue infection – 4mg/kg every 24 hours
Doses studied in ongoing clinical trials for endocarditis and bacteremia are 6mg/kg every 24 hours

Disease state based dosing:
- Hepatic failure: Not significantly altered in patients with hepatic impairment; no dosage adjustments in this population are necessary
- Renal failure: In patients with an estimated CrCl < 40ml/min require a dosage adjustment of 4mg/kg every 48 hours.

**Dosing during Continuous Renal Replacement Therapy**
- CVVH (Continuous venovenous hemofiltration): 4 or 6mg/kg IV q48h
- CVVHD (Continuous venovenous hemodialysis): 4 or 6mg/kg IV q48h
- CVVHDF (Continuous venovenous hemodiafiltration) 4 or 6mg/kg IV q48h
Note: CVVH is mainly for fluid removal alone. Many institutions will employ more CVVHD or CVVHDF which combine dialysis with fluid removal.

**Contraindications/Warnings/Precautions:**
- Patients receiving daptomycin should be monitored for the development of muscle pain or weakness.
- Consideration should be given to temporarily suspending agents associated with rhabdomyolysis.

**Drug Interactions:**
Limited data available.

**Pregnancy:**
Category B: No evidence of risk in humans but studies inadequate.

**Monitoring Requirements:**
CPK levels should be monitored weekly. Daptomycin should be discontinued in patients with unexplained signs and symptoms of myopathy in conjunction with CPK elevation > 1000U/L, or in patients without reported symptoms who have marked elevations in CPK (>2000U/L).

**Brand names/Manufacturer:** Cubicin/Cubist pharmaceuticals