

INFORMATION FOR PATIENTS

Administering nebulised Colomycin®

In adults with non-cystic fibrosis bronchiectasis

General information about nebuliser therapy.

This leaflet provides information about the use of nebulised Colomycin (also known as Colistin or Colistimethate Sodium). It is not intended to replace talking with medical or nursing staff.

Inhalation (breathing medication into the lungs) via a nebuliser and compressor system is an excellent delivery technique. It allows treatment to be delivered directly where it is needed, into the lungs and airways.

The fine mist created by a nebuliser allows particles of medication to be breathed in efficiently to reach the small airways of the lungs.

The use of inhaled nebulised Colomycin for the treatment of infection in patients with non-cystic fibrosis bronchiectasis is an unlicensed indication, but common practice and recommended in British Thoracic Society (BTS) guidance.

How to prepare the Colomycin:

- Wash your hands.

- You will need to prepare the following on a clean surface:
 1. Vial of Colomycin as prescribed.
 2. Vial of 0.9% sodium chloride as prescribed.
 3. 3ml or 5ml syringes.
 4. Pari LC Plus nebuliser and filter/valve set.
 5. Sharps bin.
- Check that the vial of Colomycin is of the prescribed dose and has not passed its 'use by' date.
- Flip the top of the Colomycin vial and rip the silver cap from around the top of the vial. See the following pictures to help explain this part of the procedure.



- Remove the rubber bung.
- Twist the top off the vial of 0.9% sodium chloride. Insert the syringe into the hole at the top of the vial and draw up the prescribed amount 0.9% sodium chloride.
- Put the prescribed amount of 0.9% sodium chloride into the vial of Colomycin. Put the rubber bung back on and roll the Colomycin carefully to mix the dry powder with the 0.9% Sodium Chloride.
- Remove the rubber bung and pour the antibiotic solution into the nebuliser chamber. Assemble the nebuliser chamber, expiratory filter and mouthpiece. Attach the lid to the nebuliser chamber.
- Attach tubing from the compressor to the nebuliser chamber.
- You are now ready to start nebulising the Colomycin.

How to administer inhaled Colomycin:

- To prevent exposure to others, the door of the room should remain closed and nobody else should enter during nebulisation and for 30 minutes afterwards. A window should be opened for the same period.
- The compressor works from mains electricity, therefore connect the supply lead to the machine socket and plug into the mains supply.
- Connect the nebuliser chamber and expiratory filter to the compressor with the tubing supplied.

- Switch on and breathe slowly in and out with the mouthpiece in your mouth.
- Treatment is finished when the nebuliser begins to spit.
- When finished, safely dispose of the used Colomycin vial, the sodium chloride vial and the syringe into the sharps bin provided by your respiratory nurse.
- Wash your hands.

How to gain the maximum benefit from your medication

Follow these steps:

- Sit comfortably in an upright position.
- Mouthpieces should be used to help efficient drug delivery and prevent any mist irritating the eyes.
- Seal your lips around the mouthpiece and breathe through your mouth.
- Breathe at a rate which is comfortable.
- Do not talk while using your nebuliser.
- If a short break is required at intervals, you can switch off the compressor and start again when ready.
- When nebulising antibiotics, a filter/valve set should be used to prevent possible environmental contamination.
- After inhaling the nebulised Colomycin, ensure you rinse your mouth with fresh water to minimise local exposure.

Potential side-effects

You will have been given a test dose of nebulised Colomycin by the respiratory nurse to ensure you do not experience chest tightness or difficulty with breathing while inhaling the antibiotic.

Before you start

Take your reliever inhaler, or nebuliser (Salbutamol/Ventolin), as prescribed at least **20 minutes before** inhaling the Colomycin.

Having started the course, if you experience any symptoms of chest tightness or difficulty with breathing you should immediately:

- **STOP** the nebuliser.
- Take your **RELIEVER** inhaler or nebuliser (Salbutamol/Ventolin) as prescribed.
- If this is severe and does not improve with Salbutamol, go to your nearest Emergency Department or phone for an ambulance.
- **Inform your respiratory nurse at the earliest opportunity.**
- Should you experience any other side effects, you need to stop using the nebulised Colomycin and **seek medical advice and inform your respiratory nurse at the earliest opportunity.**

Cleaning the nebuliser

Pseudomonas germs (bacteria) love a warm moist environment.

If you do not clean the nebuliser equipment properly, germs will thrive. It is important to keep your nebuliser clean and dry.

A small amount of drug always remains in the medication container after treatment. This can crystallise and block the nebuliser jets if it is not cleaned.

Please clean the equipment as follows:

- After every use, disconnect the nebuliser from the tubing and turn on the compressor for a short period to clear any moisture from the tubing.
- Remove the tubing and the mouthpiece from the nebuliser.
- Unscrew all the parts of the nebuliser.
- Wash the nebuliser chamber and mouthpiece in hot soapy water.
- Rinse under hot running water to clear the fine jets and allow to dry thoroughly.
- It is essential the nebuliser parts are completely dried before they are reassembled.
- Always follow the instruction sheet included in the nebuliser equipment pack on how to clean the Pari LC Plus nebuliser and filter/valve set.

The Pari LC Plus nebuliser and filter/valve set will last for 12 months and will need to be changed after this time. This will be renewed by your respiratory nurse.

Care of the compressor:

- Always keep your compressor on a firm surface and not on the carpet or floor, to avoid dust being drawn in.
- Regularly wipe clean with a damp cloth.
- The compressor should be serviced every 6 -12 months. This needs to be arranged through clinic 2 at King's Mill Hospital.

Filter pads

These must be changed every time after using the nebuliser. See your respiratory nurse for a further supply.

Contact details

Respiratory Specialist Nurses
Respiratory Department
Level 4
King's Mill Hospital
Sutton-in-Ashfield
Notts
NG17 4JL

Telephone: 01623 622515, extension 6831, 3541 or 6324, Monday to Friday between 9am–5pm.

Other useful contact

Asthma + Lung UK
Telephone helpline: 0300 222 5800
Email: helpline@asthmaandlung.org.uk
WhatsApp helpline (asthma): 07999 377 775
Website:
<https://www.asthmaandlung.org.uk/>

Further sources of information

NHS Choices: www.nhs.uk/conditions
Our website: www.sfh-tr.nhs.uk

Patient Experience Team (PET)

PET is available to help with any of your compliments, concerns or complaints, and will ensure a prompt and efficient service.

King's Mill Hospital: 01623 672222

Newark Hospital: 01636 685692

Email: sfh-tr.PET@nhs.net

If you would like this information in an alternative format, for example large print or easy read, or if you need help with communicating with us, for example because you use British Sign Language, please let us know. You can call the Patient Experience Team on 01623 672222 or email sfh-tr.PET@nhs.net.

This document is intended for information purposes only and should not replace advice that your relevant health professional would give you.

External websites may be referred to in specific cases. Any external websites are provided for your information and convenience. We cannot accept responsibility for the information found on them.

If you require a full list of references for this leaflet, please email sfh-tr.patientinformation@nhs.net or telephone 01623 622515, extension 6927.

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