

Ciprofloxacin

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A-Z drug finder

Drug name

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Brand name

Ciprofloxacin

For more detailed drug information, see [Ciprofloxacin](#) in the AMH.

Dosage – Ciprofloxacin

Length of course depends on the infection and its response to treatment.

Severe bacterial infections

1 month – 18 years, oral 10–15 mg/kg (maximum 500 mg) twice daily (usual adult dose is 250–500 mg twice daily). For more serious infections (eg in bone or joints) 20 mg/kg (maximum 750 mg) twice daily can be used.

1 month – 18 years, IV infusion 10 mg/kg (maximum 400 mg) every 12 hours. For more serious infections (eg in bone or joints) give every 8 hours (maximum 1.2 g daily).

Cystic fibrosis

1 month – 18 years, oral 15–20 mg/kg (maximum 750 mg) twice daily.

1 month – 18 years, IV infusion 10 mg/kg (maximum 400 mg) every 8 hours.

Prevention of meningococcal disease

12–18 years, oral 500 mg as a single dose.

Chronic suppurative otitis media, discharging tympanostomy tubes, otitis externa with eardrum perforation

1 month – 18 years, 5 ear drops into the affected ear(s) twice daily until a few days after symptoms have cleared. Review if there is no response within a week. Length of treatment should not exceed 2 weeks for otitis externa.

Prolonged treatment may be required for chronic suppurative otitis media; seek ENT specialist advice if response is slow (eg still symptomatic after 4–6 weeks).

Severe bacterial conjunctivitis

1 month – 18 years, 1 eye drop every 2 hours for 2 days; then if there is improvement, 1 drop every 4–6 hours for 5 days. There is no need to wake the child.

Bacterial keratitis

1 month – 18 years

Seek ophthalmologist advice; before starting treatment, obtain sample for microbiological culture.

Day 1, 1 eye drop every 15 minutes for the first 6 hours, then every 30 minutes.

Day 2, 1 eye drop every hour.

Subsequent days, 1 eye drop every 4 hours. Decrease frequency according to clinical response (only under ophthalmologist supervision).

Off-label use

Product information does not include doses for discharging tympanostomy tubes, otitis externa or systemic infections in children (except for inhalational anthrax exposure). Product information for eye drops does not include doses for children <1 year.

Practice points

- there is very little evidence for use of ciprofloxacin eye drops in children <1 year
- other antibacterials are preferred for conjunctivitis to slow emerging resistance

Systemic use

- rifampicin is preferred for prevention of meningococcal disease; use ceftriaxone or ciprofloxacin when rifampicin is unsuitable (eg if taking oral contraceptives)
- ensure adequate hydration and avoid alkaline urine (increased risk of crystalluria)
- consider dosage adjustment in renal impairment

Products

[Search for Ciprofloxacin on the PBS](#)

tab, 250 mg, 14, *Cipro[®]*, PBS-A^{1,2}

tab, 250 mg (scored), 14, *C-Flox*, *Ciproxin[®]*, PBS-A^{1,2}

tab, 500 mg, 14, *Cifran*, *Cipro[®]*, PBS-A¹

tab, 500 mg (scored), 14, *C-Flox*, *Ciproxin*, *Loxip[®]*, PBS-A¹

tab, 750 mg, 14, *Cifran*, *Ciprol*, *Loxip[®]*, PBS-A¹

tab, 750 mg (scored), 14, *C-Flox[®]*, PBS-A¹

inj, 2 mg/mL, 50 mL, 100 mL, 1, *Ciproxin IV*

inj, 2 mg/mL, 50 mL, 100 mL, 200 mL, 10, *Ciprofloxacin[®]*

ear drop, 0.3%, 5 mL, *Ciloquin*

ear drop, 0.3%, 5 mL, *Ciloxan*, PBS-A³

eye drop, 0.3%, 5 mL, *Ciloquin*, *Ciloxan*, PBS-A[2]⁴

¹ respiratory tract infection due to *P. aeruginosa* (proven/suspected) or bacterial gastroenteritis in severely immunocompromised patients; infections where other antibacterials are ineffective/inappropriate, see PBS

² gonorrhoea

³ suppurative otitis media, see PBS

⁴ bacterial keratitis

^a other generic brands available