

Cellulitis Prophylactic Antibiotic Pathway for Lymphoedema

Patient has had two or more episodes of Cellulitis in the last 12 months thus requires Prophylactic Antibiotics prescribed by GP

Allergic to Penicillin –
Prescribe
Clarithromycin 250mg
BD for twelve months

Penicillin V 250 mg BD for 12 months if BMI Less than 33
Penicillin V 500 mg BD for 12 months if BMI More than 33

If ano-genital cellulitis trimethoprim 100mg daily taken at night
should be prescribed

No further episodes of
Cellulitis over twelve
months **Stop Antibiotics**

Further episodes of cellulitis continue with
Prophylactic antibiotics for another year.
Alternatives such as Clindamycin 150mg daily
or Cefalexin 125mg daily or Doxycycline 50mg
daily can be considered.
**In these circumstances joint collaboration
with the GP, LNW and Microbiologists is
recommended**

**Patients must continue with the four
cornerstones of Lymphoedema Management
including daily skin care, weight
management, exercise and movement, and
compression therapy.**

Lymphoedema patients with a history of recurring cellulitis are increasingly susceptible to further episodes. LNW recommend that patients be provided with a two-week supply of antibiotics particularly if they are away from home e.g. holiday. In some cases, liaising with the GP will be required to enable provision of a prescription, as these are not routinely prescribed.

References

British Lymphology Society
NICE Guidance
All Wales Primary Care Antimicrobial Guidance