

Antimicrobial therapy for bacterial meningitis *up to date 18.2*

According to Organism:

Organism	Standard therapy	Alternative therapy
Neisseria meningitidis	Ceftriaxone or Cefotaxime	
Streptococcus Pneumonia	Vancomycin + Ceftriaxone or Cefotaxime	Chloramphenicol
H influenza	Ceftriaxone or Cefotaxime	
Enterobacteriaceae	Ceftriaxone or Cefotaxime	Extended spectrum penicillin + Aminoglycoside, Aztreonam
Pseudomonas aeruginosa	Ceftazidime + Aminoglycoside	Extended spectrum penicillin + Aminoglycoside, Aztreonam, Imipenem.
Streptococcus agalactiae	Ampicillin + Aminoglycoside	Ceftriaxone or Cefotaxime
Listeria monocytogenes	Ampicillin + Aminoglycoside	Cotrimoxazole
Staphylococcus aureus MSSA	Nafcillin or Oxacillin	Vancomycin
Staphylococcus aureus MRSA	Vancomycin	Cotrimoxazole – Quinolones
Staphylococcus epidermidis	Vancomycin + Rifampicin	Linezolid

According to Age and Comorbidities

< 1 month	S. agalactiae, E coli, Listeria, Klebsiella	Ampicillin + Aminoglycoside
1-23 months	S. pneumonia, N. meningitidis, H. influenza	Vancomycin + 3 rd gen. cephalosporins
2-50 years	N. meningitidis, S. pneumonia	Vancomycin + 3 rd gen. cephalosporins
>50 years	S. pneumonia, N. meningitidis, Listeria	Vancomycin + 3 rd generation cephalosporins + Ampicillin
Head trauma (fracture base)	S. pneumonia, H. influenza, group A B-hemolytic strept.	Vancomycin + 3 rd gen. cephalosporins
Head trauma (penetrating)	Staphylococci, Aerobic G-ve bacilli including pseudomonas	Vancomycin + Cefepime or Ceftazidime
Post neurosurgery	Aerobic G-ve bacilli including pseudomonas, Staphylococci	Vancomycin + Cefepime or Ceftazidime
Immunocompromised	S. pneumonia, N. meningitidis, Listeria, Aerobic G-ve bacilli including pseudomonas	Vancomycin + Ampicillin + Cefepime or Meropenem