

## Health Update:

### Update: Shortage of Erythromycin Ophthalmic Ointment for Prophylaxis of Ophthalmia Neonatorum

September 10, 2009

This document will be updated as new information becomes available. The current version can always be viewed at <http://www.dhss.mo.gov>

The Missouri Department of Health & Senior Services (DHSS) is now using 4 types of documents to provide important information to medical and public health professionals, and to other interested persons:

**Health Alerts** convey information of the highest level of importance which warrants immediate action or attention from Missouri health providers, emergency responders, public health agencies or the public.

**Health Advisories** provide important information for a specific incident or situation, including that impacting neighboring states; may not require immediate action.

**Health Guidances** contain comprehensive information pertaining to a particular disease or condition, and include recommendations, guidelines, etc. endorsed by DHSS.

**Health Updates** provide new or updated information on an incident or situation; can also provide information to update a previously sent Health Alert, Health Advisory, or Health Guidance; unlikely to require immediate action.

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September 10, 2009

**FROM: MARGARET T. DONNELLY  
DIRECTOR**

**SUBJECT: Update: Shortage of Erythromycin Ophthalmic Ointment for Prophylaxis of Ophthalmia Neonatorum**

The Centers for Disease Control and Prevention (CDC) and the Missouri Department of Health and Senior Services (DHSS) recently received reports of a shortage of erythromycin (0.5%) ophthalmic ointment, which is the recommended prophylaxis for ophthalmia neonatorum. On September 4, 2009, DHSS issued a Health Advisory, entitled "Shortage of Erythromycin Ophthalmic Ointment for Prophylaxis of Ophthalmia Neonatorum", which contained guidance from CDC for responding to this situation ([http://www.dhss.mo.gov/BT\\_Response/HAd9-4-09.pdf](http://www.dhss.mo.gov/BT_Response/HAd9-4-09.pdf)).

**CDC has now revised their guidance to include not only recommendations for securing supplies of erythromycin ophthalmic ointment, but also recommendations for the use of other ophthalmic solutions or ointments "for extreme situations where erythromycin ophthalmic ointment is not available." An alternative or additional approach provided in the guidance is to test the mother for gonorrhea and chlamydia prior to delivery in order to identify exposed infants. Empiric treatment is recommended for infants exposed to gonorrhea; monitoring for development of symptoms prior to initiating treatment is recommended for infants exposed to chlamydia. The revised CDC guidance is available at:**

<http://www.cdc.gov/std/treatment/2006/erythromycinOintmentShortage.htm>.

Additional changes to this guidance may occur in the future. Providers are strongly encouraged to periodically check CDC's STD Treatment Guidelines Web site at <http://www.cdc.gov/std/treatment/default.htm> for possible further revisions.

Contact the FDA drug shortage e-mail account ([drugshortages@fda.hhs.gov](mailto:drugshortages@fda.hhs.gov)) with additional inquiries about the shortage. Questions can also be directed to DHSS's Bureau of HIV, STD, and Hepatitis at 573/751-6439, or 800/392-0272 (24/7).

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