<table>
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<th>DRUG:</th>
<th>HYDRAZINE HYDROCHLORIDE</th>
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| PRESENTATION: | Ampoule: 20 mg  
Oral Solution: 10 mg/mL |
| ACTION & INDICATION: | Peripheral vasodilator  
Moderate to severe hypertension, congestive cardiac failure. |
| DOSE: | **Intravenous:**  
Initial dose: 100 - 500 microgram / kg /dose 6 to 8 hourly  
Dose may be increased slowly as required to a  
Maximum dose: 2 mg/kg/dose  
**Continuous intravenous infusion:**  
12.5 – 50 microgram/kg/hour  
**Oral:**  
Initial dose: 250 microgram to 1mg/kg /dose 6 to 8 hourly  
Increase gradually to 2mg/kg/dose. |
| PREPARATION: | **IV:** Reconstitute using 1mL of Water for Injections. Then dilute 1mL to 20mL with 0.9% Sodium chloride.  
= 1mg/mL (1000microgram/mL)  
May be further diluted if required.  
Continuous intravenous solution:  
Withdraw 1250microgram (1.25mL) of the 1mg/mL dilution, per kg of baby’s weight, and dilute to 50mL with 0.9% Sodium chloride.  
This will give the following infusion rate:  
1mL/hr = 25microgram/kg/hour |
| ADMINISTRATION: | **IV:** Slow IV over 5 to 20 minutes  
Continuous intravenous infusion  
**Oral:** Give with feeds to enhance absorption. |
| ADVERSE EFFECTS: | Hypotension – also precipitated by anaesthetic agents.  
Reflex tachycardia - modified by β blocking drugs.  
Sodium, water retention  
Flushing; dyspnoea, urticaria, fever  
Anaemia, leucopenia, thrombocytopenia |
| COMMENTS: | Monitor blood pressure pre and ½ hour post-dose, continue until stabilized for 48 hours, then twice daily.  
U & E’s at commencement and at any change in therapy  
Discard dilution immediately after use.  
Incompatible with glucose containing solutions |
| REFERENCES: | Neofax 2012  
BNF for Children 2013 |
| DATE: | September 2013 |