# NORADRENALINE

## DRUG

**PRESENTATION:** Ampoule: 4mg/4mL

**ACTION & INDICATION:** Noradrenaline is a catecholamine with β-1and potent α-1 activity. Usually added to dopamine to treat profound hypotension, in the setting of sepsis when other inotropes have failed. It also has a direct stimulatory action on the myocardium.

**DOSE:**

- **DOSE stated as Noradrenaline base**
  - Initial Dose: 0.05 – 0.1 microgram/kg/minute
  - Titrate in small increments as required to a maximum dose:
    - 0.05 – 0.5 microgram/kg/minute

**PREPARATION:** Use solution prepared in Pharmacy if available.

- To give an infusion rate of 0.1 microgram/kg/minute:
  - Take 300 microgram (0.3mg) of noradrenaline base per kilogram of baby’s weight and dilute to 50mL with 5% glucose or 5% glucose/saline solutions.
  - 1mL/hr = 0.1 microgram/kg/minute

**ADMINISTRATION:** IV Infusion into central line access only

**ADVERSE EFFECTS:** Hypertension which may be associated with bradycardia. Prolonged use of high doses can result in renal impairment and reduced peripheral tissue perfusion.

- Monitor BP continuously.
- Extravasation can cause local tissue necrosis. The infusion site should be checked regularly.

**COMMENTS:** Do not cease infusion abruptly

- Discard diluted solutions after 24 hours
- Protect ampoules from light during storage and discard if discoloured.
- Correct hypovolaemia before commencing noradrenaline
- Metabolised in liver, excreted in urine

## REFERENCES:

- Paediatric Pharmacopoeia 13th Ed Royal Children’s Hospital Melbourne
- Frank Shann Drug doses 2005

## DATE THIS REVIEW:

June 2014