FOLIC ACID

Read in conjunction with Disclaimer

Formulary: Unrestricted	
Presentation	**Oral Solution:** 500 microgram/mL
Classification	B group vitamin. Required for synthesis of purine and pyrimidine bases (DNA) and for amino acid metabolism and normal erythropoiesis. Folic acid stimulates the production of red blood cells, white blood cells and platelets.
Indication	• Megaloblastic anaemia. • Folic acid deficiency. • In combination with erythropoietin treatment.
Special Considerations	Folic acid monotherapy is not sufficient for treatment of pernicious anaemia or other megaloblastic anaemias when vitamin B12 is deficient.
Monitoring	No specific monitoring required. Serum folate may be considered at the discretion of the treating clinician.
Interactions	• **Phenytoin:** Concurrent use of folic acid and phenytoin may result in decreased folate concentrations and decreased phenytoin effectiveness. • **Phenobarbital:** Folic acid may decrease phenobarbital concentration and its therapeutic effect; monitor phenobarbital concentration and clinical effect.
Side Effects	Allergic reactions have occurred with both oral and IV folic acid administrations.
Storage & Stability	**Oral Solution:** Store at room temperature, below 25°C. Protect from light.
Comments	Human milk fortifiers contain folate and provide 44 to 64 microg/kg/day of folate at 150 mL/kg/day of fortified human milk.

ORAL		
	Presentation	**Oral solution**: 500 microg/mL
	Dosage	**All indications** 50 to 100 microgram once daily
	Administration	• Draw prescribed dose into oral/enteral syringe • Can be given Oral/OGT/NGT • May be given anytime in relation to feeds

Related Policies, Procedures, and Guidelines

Clinical Practice Guidelines:

CAHS Neonatology - Anaemia

Pharmaceutical and Medicines Management Guidelines:

CAHS Neonatology – Medication Administration Guideline

References

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