



NEONATAL

SOTALOL




This document should be read in conjunction with this [DISCLAIMER](#)

Highly Restricted: Requires Cardiologist or Neonatologist approval before commencing

Presentation	Suspension: 10mg/mL (Prepared in Pharmacy). Ampoule: 40mg/4mL = 10mg/mL
Classification	Non-cardioselective beta adrenergic blocking agent.
Indication	Hypertension Treatment of supraventricular and ventricular arrhythmias
Contraindications	Sotalol should not be used when there is shock (cardiogenic or hypovolaemia), congestive cardiac failure, sinus bradycardia, heart block, congenital or acquired long QT syndromes, hypokalaemia or hypomagnesaemia
Dose	Oral: (<i>preferred</i>) 1 mg/kg/dose every 12 hours May increase every 3 to 4 days until stable rhythm is maintained Maximum dose 4mg/kg/dose 12 hourly IV: 0.5-1.5 mg/kg/dose every 12 hours
Monitoring	Perform a 12 lead ECG before and after the first dose to assess for any increase in QT interval from baseline. To be performed with the initial dose and after any increases in dose. For initiation of therapy and for intravenous treatment, infant should be on cardiorespiratory monitor. Monitor electrolytes, especially potassium and magnesium.
Dose Adjustment	Sotalol is renally excreted – use with caution in patients with renal impairment.

Compatible Fluids	Glucose 5% , Sodium Chloride 0.9%
Preparation	<p><u>IV:</u></p> <p>Take 1mL (10mg) of sotalol solution and dilute to 5mL with appropriate diluent.</p> <p>Concentration = 10mg/5mL = <u>2mg/mL</u></p>
Administration	<p><u>IV:</u></p> <p>Inject Over at least 10 minutes. The cannula should be flushed with sodium chloride 0.9% pre- and post-administration of sotalol.</p> <p><u>Oral:</u></p> <p>Administer on an empty stomach at least 30 minutes before feeding.</p>
Adverse Reactions	<p>Common: Dyspnoea, fatigue, dizziness, headache, fever, excessive bradycardia and/or hypotension. Usually subside when sotalol dose is reduced.</p> <p>Sotalol may be proarrhythmic with prolongation of QT interval.</p> <p>Rare: torsades de pointes</p>
Storage	<p>Ampoules: Store at room temperature, below 25°C.</p> <p>Oral Suspension: Refrigerate, store at 2–8°C</p>
Interactions	<p>Sotalol interactions have been reported with other antiarrhythmics: Concomitant use of sotalol with these agents and with other beta-blocking drugs is not recommended.</p> <p>Concomitant use of sotalol and diuretics may increase the cardiotoxicity.</p>
Notes	<p>During intravenous administration, resuscitation equipment must be accessible.</p> <p>Atropine must be available for profound bradycardia</p>
References	<p>Saul JP, Schaffer MS, Karpawich PP, Erickson CC, Epstein MR et al. Single dose pharmacokinetics of sotalol in a pediatric population with supra ventricular and / or ventricular tachyarrhythmia. The Journal of Clinical Pharmacology, 2001: 41,1;35. http://jcp.sagepub.com Accessed July 2011.</p>

	<p>Truven Health Analytics. Sotalol. In: NeoFax [Internet]. Greenwood Village (CO): Truven Health Analytics; 2019 [cited 2019 Aug 06]. Available from: https://neofax.micromedexsolutions.com/</p> <p>Takemoto CK, Hodding JH, Kraus DM. Pediatric & neonatal dosage handbook with international trade names index : a universal resource for clinicians treating pediatric and neonatal patients. 24th ed. Hudson (Ohio): Lexicomp; 2401. 2</p> <p>Society of Hospital Pharmacists of Australia. Buprenorphine. In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2019 [cited 2019 Aug 07]. Available from: http://aidh.hcn.com.au</p>
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