Paediatrics: Tranexamic acid (paediatric trauma)

Reference No:MONO-PAEDS/519/23

Presentation:	Tranexam	nic acid 100r	ng/ml sol	ution for inj	ection 5ml	ampoules		
Indication:	Tranexamic acid is an antifibrinolytic that prevents or reduces bleeding by impairing fibrin dissolution. Early administration (preferably in first 3 hours) is vital for efficacy. The dosing sche is recommended in BNFc, RCPCH and NPPG for the management of 'haemorrhage following matrauma'.					dosing schedule		
	Advanced Paediatric Life Support (APLS) guidance advises tranexamic acid is used for haemorrhage following major trauma, but this is unlicensed.							
	Please see BNFc for dosing schedules for other indications.							
Dose:	 Loading dose: 15mg/kg (maximum 1g) over 10 minutes Maintenance dose: 2mg/kg/hour (maximum 1g per dose) Infuse for at least 8 hours or until bleeding stops 							
Route of administration:	Slow IV injection (over 10 minutes) followed by IV infusion							
Instructions for preparation:	 Loading dose: dilute to convenient volume with sodium chloride 0.9% or glucose 5% and infuse over 10 minutes. Maintenance dose: add 500mg to 500ml sodium chloride 0.9% or glucose 5% (to give a 1mg/mL concentration) and infuse at 2ml/kg/hour. 							
<u>Prescribing</u>	QHB prescribe on MediTechRDHLoading dose to be prescribed on EPMA (Lorenzo) or on the 'STAT dose' section on the paper chart.Maintenance doses to be prescribed on the paper chart:The concentration of the maintenance infusion is 1mg/mL i.e. 500mg/500mL Example prescription for 12 kg infant:							
	Drug		Drug amour	it in bag	Diluent		Total volume (ml)	Route
	Tranexam	nic acid	50	0mg	Sodium Ch	loride 0.9%	500ml	IV
	Start date <i>2/8/19</i> Pharm	Drug concentr		Infusion range Dose/kg/time ml/hr	2mg/k	1in g/hour g/hr	Max 2mg/kg/hour 24mg/hr	Name, Sig, Bleep A.Doctor #1234
Known compatibility issues	Do not infuse with any other drugs.							
Additional Comments:	Suggested monitoring: can cause hypersensitivity reactions including anaphylaxis. Rapid IV injection may cause malaise and hypotension.							

Contra-indications: fibrinolytic conditions following disseminated intravascular coagulation (unless predominant activation of fibrinolytic system with severe bleeding); history of convulsions; thromboembolic disease.				
Note: Injection not licensed for use in children under 1 year or for administration by intravenous infusion				

Note: The contents of this monograph should be read in conjunction with information available in the BNFC and Medusa

References:

Royal College of Paediatrics and Child Health Evidence Statement: Major trauma and the use of tranexamic acid in children. November 2012. Accessed via:

https://www.medusaimg.nhs.uk/docs/RCPCHTXA%20evidence%20statement_final%20v2.pdf Accessed 30/11/;23 British National Formulary for Children, accessed via <u>www.medicinescomplete.com</u> on 30/11/23 Medusa Paediatric Injectable Medicines Guide, accessed via https://medusa.wales.nhs.uk/IVGuideDisplay.asp 15.6.23

Document control sheet

GUIDELINE NUMBER	MONO-PAEDS/519/23
AREA IN WHICH THIS MONOGRAPH APPLIES	Paediatrics - CED

DIVISIONAL AUTHORISATION			
GROUP	DATE		
Paediatric monograph review group	12/12/2023		

AUTHORS				
Author	Position	Date		
Written by:	K.Thomson (original guideline)	9.4.13		

If review:

	Position	Date
Reviewed by:	Joanna Hurcombe Advanced Pharmacist, E&T and Women's and Children's	November 2023
Checked by:	Lamia Ahmed Advanced Pharmacist- Womens and Childrens	December 2023

Change history:

Changes Reference	Change details	Date
1	Reviewed, transferred to new monograph template, references updated and minor changes made.	31.7.19
2	Changed wording in indication section as now dosing is published in the BNFc.	December 2023
3	Removal of 'subsequent bags made from pharmacy' due to changes in pharmacy service and addition of concentration of maintenance product added	December 2023