

# Phenobarbital IV and Oral Neonatal

Presentation:	60mg/ml injection
Indication:	Management of neonatal seizures
Dose:	LOAD (Intravenous):  1st load: 20 mg/kg infused over 20mins (i.e. rate not exceeding 1mg/kg/minute as per smart pump instruction.)
	2 <sup>nd</sup> and 3 <sup>rd</sup> load (if required after 20 mins): 10mg/kg infused over 10mins *
	(i.e. 2 half loads can be administered in addition to the initial full loading dose)
	* If the sum of all loading doses given exceeds 20mg/kg, the maintenance dose should be withheld for 3-4 days, especially if there has been intrapartum asphyxia.
	MAINTENANCE:  2.5 – 5 mg/kg once or twice daily (IV or oral) adjusted according to response; starting at least 12-24 hours after the loading dose.
	The dose is likely to require increasing to twice daily after the first 1-2 weeks of treatment due to liver enzyme induction and reduced plasma half-life.
Route of administration:	IV — administer via central line due to extreme pH and osmolality. If not possible, administer with extreme caution via a large peripheral vein (monitor the site closely for phlebitis).
	Oral – use alcohol-free liquid or tablets can be crushed and dispersed in water. Contact Pharmacy for further advice if oral route required to ensure alcohol-free preparation obtained (DO NOT GIVE INJECTION VIA ENTERAL ROUTE)



Instructions for preparation:

To make the IV **LOADING** dose:

For all babies, dilute solution with water for injection to make a syringe with a concentration of **20mg/mL**.

Example if using a 60mg/mL vial for a 3kg baby who requires a 20mg/kg load:

Draw up 1mL of 60mg/mL and dilute to 3mL with water for injections, to give a concentration of 20mg/mL and administer over 20minutes. Flush line with sodium chloride at same rate as infusion (9mL/hr)

NB. VTBI (ml) = Concentration (mg per ml)

\* IN THE ABOVE EXAMPLE \* 
$$\frac{60 \text{mg}}{20 \text{mg/ml}}$$
 = 3mL

To make the IV MAINTENANCE dose:

Make a syringe with a concentration of **2.5mg/mL\***, to allow for a more accurate dosing/measurement.

E.g. a 3kg baby having a 2.5mg/kg maintenance dose:

 $3kg \times 2.5mg = 7.5mg$  to be administered.

Draw up 1mL of 60mg/mL phenobarbital solution for injection and dilute with water for injection to a total volume 24mL (providing a **2.5mg/mL** concentration) prime the line, discarding overage and administer 3mL at 1mg/kg/minute. Flush line with sodium chloride 0.9% at same rate as drug infusion.

## \*\* ALWAYS REMOVE ANY EXCESS FROM THE SYRINGE\*\*

\*Contact Pharmacy if a more concentrated solution is required or for more information. Note SMART pump concentration set at 2.5mg/mL

### For **ORAL MAINTENANCE** dose:

Oral suspension 10mg/ml – supplied by pharmacy on a named patient basis (specify alcohol-free when ordering) Order on the PATIENT SPECIFIC (Temporary Stock) Requisition for Schedule 3 Controlled Drug form found on NET-i



Loading Dose	
<ul> <li>Load Syringe, prime line using the pump for accurate dosing</li> </ul>	
Open 'NICU' folder then open 'phenOBARBital Loading' programme	
<ul> <li>Enter the Total Volume to be Infused VTBI in mls and confirm</li> </ul>	
Confirm Total Time of 20mins	
<ul> <li>Perform STOP moment with medical team (Pump against prescription)</li> </ul>	
Connect to Baby	
Press start button	
Maintenance Dose	
<ul> <li>Load Syringe, prime line using the pump for accurate dosing</li> </ul>	
Open 'NICU' folder then open 'phenOBARBital Maint' programme	
Enter the Baby's weight in kg and confirm	
Enter the Total Volume to be Infused VTBI in mls and confirm	
Enter the dose in mg/kg/min and confirm	
<ul> <li>Visually confirm the rate (ml/h) against the prescribed dose (mg/kg/min)</li> </ul>	
<ul> <li>Perform STOP moment with medical team (Pump against prescription)</li> </ul>	
Connect to Baby	
Press start button	
Compatible: Meropenem, morphine sulphate	
Incompatible: Atracurium, ranitidine	
Please refer to medusa for further compatibility instructions	
Approx. time to steady state: 10-14 days but is greatly <b>prolonged in neonates.</b>	
Plasma-phenobarbital concentration for optimum response is 15–40 mg/litre; however, monitoring the plasma-drug concentration is less useful than with other drugs because tolerance occurs.	

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

### **References:**

British National Formulary for Children, accessed via  $\underline{www.medicinescomplete.com}$   $\underline{30/11/23}$ 

SPC for PHENOBARBITAL accessed via www.medicines.org.uk

Medusa Injectable Medicines Guide, accessed via <a href="http://medusa.wales.nhs.uk">http://medusa.wales.nhs.uk</a>

Trissel LA (Ed), Handbook on Injectable Drugs, accessed via <a href="www.medicinescomplete.com">www.medicinescomplete.com</a>

Neonatal Formulary, The Northern Neonatal Network, Phenobarbital

**Leeds Formulary Formulary** 

 $\underline{https://www.leeds formulary.nhs.uk/chapters SubDetails.asp? Formulary Section ID=24 \& SubSection}$ 

Ref=24.16&SubSectionID=A100#3633 Accessed 30/11/23



# **Document control sheet**

GUIDELINE NUMBER	
AREA IN WHICH THIS MONOGRAPH APPLIES	NICU

# **DIVISIONAL AUTHORISATION**

GROUP	DATE
Paediatric monograph review group	22/12/23

# **AUTHORS**

Author	Position	Date
Written by: Kevin	Advanced Pharmacist Women's	
Inglesant	& Children's	October 2018
Checked by:	Specialist Pharmacist Women's &	October 2018
Harriet Hughes	Children's	

## If review:

	Position	Date
Reviewed by:		
	Specialist pharmacist	November 2023
Maisie-Jane Fry and Ellie Cheale		
Joanna Hurcombe		
	Advanced Pharmacist Women's	30/11/23
	& Children's	
Checked by:		
		December 2023
	Advanced Women's and Childrens	
	Pharmacist	

# Change history:

Changes Reference	Change details	Date
	Phenobarbital maintenance concentration changed to allow for measurability with SMART pump	18/02/2020
	Instructions for preparations updated in line with DERS update	18/02/2020
	Clarification or ordering oral Phenobarbital from Pharmacy- updated to new process, sch 3 CD form	30/11/23
	Phenobarbital concentration wording changed from 'no more than 20mg/mL concentration to '20mg/mL' to remove ambiguity and pumps set concertation= 20mg/mL. Changes made to preparation of loading dose to achieve exact drug requirements without any overage.	30/11/23