Note:
This guideline provides advice of a general nature. This statewide guideline has been prepared to promote and facilitate standardisation and consistency of practice, using a multidisciplinary approach. The guideline is based on a review of published evidence and expert opinion.

Information in this statewide guideline is current at the time of publication.

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Health practitioners in the South Australian public health sector are expected to review specific details of each patient and professionally assess the applicability of the relevant guideline to that clinical situation.

If for good clinical reasons, a decision is made to depart from the guideline, the responsible clinician must document in the patient’s medical record, the decision made, by whom, and detailed reasons for the departure from the guideline.

This statewide guideline does not address all the elements of clinical practice and assumes that the individual clinicians are responsible for discussing care with consumers in an environment that is culturally appropriate and which enables respectful confidential discussion. This includes:

- The use of interpreter services where necessary,
- Advising consumers of their choice and ensuring informed consent is obtained,
- Providing care within scope of practice, meeting all legislative requirements and maintaining standards of professional conduct, and
- Documenting all care in accordance with mandatory and local requirements

Generic Ingredients
Sodium alginate 225mg, magnesium alginate 87.5mg per sachet.

Dose and Indications

Gastro-oesophageal Reflux Disease

Oral
One sachet with at least 120mL of feed (or a proportionate dose)

Maximum dose:

- Infants up to 4.5kg: equivalent of 6 full sachets per 24 hours
- Infants 4.5kg and above: equivalent of 12 full sachets per 24 hours
Preparation and Administration

Oral

Mix one sachet with at least 120mL of feed (or a proportionate dose).

A proportionate dose should be prescribed as the fraction of a sachet (eg. quarter of a sachet).

To prepare: Mix ONE sachet in 6mL of sterile water and administer as follows

<table>
<thead>
<tr>
<th>Volume of feed</th>
<th>30mL</th>
<th>40mL</th>
<th>60mL</th>
<th>120mL</th>
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<tbody>
<tr>
<td>Prescribed proportion of sachet</td>
<td>1/4</td>
<td>1/3</td>
<td>1/2</td>
<td>1</td>
</tr>
<tr>
<td>Volume of gaviscon mixture (as prepared above)</td>
<td>1.5mL</td>
<td>2mL</td>
<td>3mL</td>
<td>6mL</td>
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</table>

For Breast fed infants - Mix one sachet with 15mL sterile water. Give with or after feeds.

Not to be given with other food thickening agents or infant milk preparations containing thickening agents (such anti-reflux preparations). Do not use with soy-based formula feeds.

When mixed with water, solution may be kept for up to 12 hours in the fridge.

Adverse Effects

Generally well tolerated, however, diarrhoea has been occasionally reported

Practice Points

> Use cautiously in patients with significant renal impairment or gastroenteritis, as Gaviscon® Infant may add to the risk of hypernatremia.

> Liquid Gavison® preparations have higher sodium content and are not recommended in infants.

> Contraindicated in infants with suspected intestinal obstruction.

> Higher doses may be used at neonatologist’s discretion.
## Document Ownership & History

**Developed by:** SA Maternal, Neonatal & Gynaecology Community of Practice  
**Contact:** Health.NeoMed@sa.gov.au  
**Endorsed by:** SA Health Safety and Quality Strategic Governance Committee  
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- Does this policy amend or update an existing policy? **Y**
- If so, which version? **V1.1**
- Does this policy replace another policy with a different title? **N**
- If so, which policy (title)?

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<th>Approval Date</th>
<th>Version</th>
<th>Who approved New/Revised Version</th>
<th>Reason for Change</th>
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<td>15/11/18</td>
<td>V2</td>
<td>SA Health Safety and Quality Strategic Governance Committee</td>
<td>Formally reviewed in line with 5 year scheduled timeline for review.</td>
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<tr>
<td>9/3/2018</td>
<td>V1.1</td>
<td>SA Health Safety and Quality Strategic Governance Committee</td>
<td>Review date extended to 5 years following risk assessment. New Template.</td>
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