Dose and Indications

**Congenital Chylothorax**

**Intravenous Infusion**

1 microgram/kg/hr increased daily by 1 microgram/kg/hr up to 10 micrograms/kg/hr, if required.

Higher doses of up to 20 microgram/kg/hour have been used in persistent chylothorax

**Refractory Hyperinsulinaemic Hypoglycaemia**

**Consult a Paediatric Endocrinologist prior to use**

**Intravenous Infusion**

0.2 to 1 microgram/kg/hr

**Subcutaneous**

2 to 5 mcg/kg/dose, 6-8 hourly

Up titrate to desired effect. Initial response should occur within 8 hours

**Preparation and Administration**

**Intravenous Infusion**

Dilute the appropriate volume of octreotide (100 or 500 microgram/mL) using compatible fluid to a maximum concentration of 25 micrograms/mL

Infuse as a continuous infusion
Subcutaneous
Allow solution to come to room temperature prior to injection. Rotate injection sites. Use the concentration with the smallest volume to reduce injection site pain. Administration may be aided by using a small plastic indwelling subcutaneous catheter (Insufion®).

For doses less than 5microgram:
Draw up 0.4 mL of 50 microgram/mL injection solution (20 microgram) and make up to a total volume of 1 mL with sodium chloride 0.9%. The final concentration is 20 microgram/mL octreotide.

For doses 5microgram or greater:
Use 50 microgram/mL solution undiluted.

Compatible Fluids
Sodium Chloride 0.9%, Glucose 5%

Adverse Effects
Common
Flatulence, vomiting, diarrhoea, abdominal distension, hyperglycaemia, hypoglycaemia, hypothyroidism.

Necrotising enterocolitis has been reported in term neonates administered octreotide

Rare
Hepatic dysfunction, bradycardia, steatorrhea

Monitoring
- Blood glucose levels
- Signs and symptoms of necrotising enterocolitis
- Thyroid function

Practice Points
- Avoid abrupt withdrawal of octreotide to avoid biliary colic and pancreatitis. Infusion can be gradually decreased over 2 to 7 days
- In refractory hyperinsulinaemic hypoglycaemia, tachyphylaxis to treatment may occur within several days

References
Octreotide

50 microgram/mL, 100 microgram/mL, 500 microgram/mL injection

Document Ownership & History

Developed by: SA Maternal, Neonatal & Gynaecology Community of Practice
Contact: Health.NeoMed@sa.gov.au
Endorsed by: Commissioning and Performance, SA Health
Next review due: 03/04/2025
ISBN number: 978-1-76083-541-5
CGSQ reference: NMG042
Policy history:

<table>
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<th>Approval Date</th>
<th>Version</th>
<th>Who approved New/Revised Version</th>
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<tr>
<td>23/11/2022</td>
<td>V2.1</td>
<td>Domain Custodian, Clinical Governance, Safety and Quality</td>
<td>Addition of subcutaneous dosing and administration</td>
</tr>
<tr>
<td>03/04/2020</td>
<td>V2.0</td>
<td>SA Health Safety and Quality Strategic Governance Committee</td>
<td>Formal review. Higher dose recommendation for chylothorax</td>
</tr>
<tr>
<td>19/04/2016</td>
<td>V1.0</td>
<td>SA Health Safety and Quality Strategic Governance Committee</td>
<td>Original SA Health Safety and Quality Strategic Governance Committee approved version</td>
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Is this a new policy (V1)? N
Does this policy amend or update and existing policy? Y
If so, which version? V2.0
Does this policy replace another policy with a different title? N