








Medications for treatment of preeclampsia and eclampsia




Preeclampsia/Eclampsia medication summary

This table has been adapted from the Queensland Maternity and Neonatal Clinical Guidelines Hypertension disorders in pregnancy.


Drug/Product	Dose	Route	Rate
Nifedipine	5-10mg capsule or 10-20mg tablet	Oral 	Repeat after 30 minutes (for 5-10mg dose) Repeat after 45 minutes (for 10-20mg dose) *Should not be given if placenta abruption is suspected.
Hydralazine 20mg Ampoule <u>Bolus Dose</u> Reconstitute with: <ul style="list-style-type: none"> 1ml H₂O for injections Dilute with 19mls sodium chloride 0.9% in a 20 ml syringe (20mg /20ml) *Attach IV additive label	5 -10mg bolus (1mg/ml)	Intravenous via <i>slow</i> injection 	Repeat 5mg doses - 20 minutes apart up to <i>max. 15mg</i> (x3 doses) Cease if maternal pulse >130bpm Consider Infusion if >20mg required or for longer term BP control Requires close monitoring and should only be given in an appropriate location able to support this.
Hydralazine Infusion 60mg <u>Maintenance Dose</u> Reconstitute with: 3 x 20mg ampoule with 3x 1ml H ₂ O for injections = 60mg Dilute with 57mls sodium chloride in a 60ml Luer lock syringe (60mg/60ml) *Attach IV additive label/ line labels	2mg/hr (2mls/hr) (1mg/ml)	Intravenous Infusion – Using IV infusion pump (drug library) 	Increase infusion 10 minutely by 2mg hour until BP stable. Maximum infusion rate of 10mg hour Consider ceasing infusion if maternal pulse >125bpm.
Magnesium Sulphate <u>Loading Dose 4g</u> 16mmol (4g) in 20mls <i>Pre-mix solution</i>	4g/20mls (60mls/hr)	Intravenous Infusion – Using IV infusion pump (drug library) 	Infuse over 20 minutes Requires close monitoring and should only be given in an appropriate location able to support this.
Magnesium Sulphate <u>Maintenance Dose 10g</u> 40mmol (9.86g) in 50mls Pre-mix solution	10g (9.86g) (5ml/hr)	Intravenous Infusion – Using IV infusion pump (drug library) 	1g/hr (5mls/hr) for 24 hours *If impaired renal function, reduce maintenance dose to 0.5g/hr.

Drug/Product	Dose	Route	Rate
Magnesium Sulphate (non Pre-mix solution) Loading Dose 4g - 20% 16mmol / 20mls	Vials 2g /10mls X2 = 4gms If smaller solution can be mixed with water for injection	Intravenous Infusion – Using IV infusion pump (drug library) 	Infuse over 20 minutes.
Magnesium Sulphate (non Pre-mix solution) Maintenance Dose 10g – 20% 40mmol (9.86g)	Vials 2g/10mls X5 = 10g If smaller solution can be mixed with water for injection	Intravenous Infusion – Using IV infusion pump (drug library) 	1g/hr (5mls/hr) for 24 hours *If impaired renal function, reduce maintenance dose to 0.5g/hr.

Seizure treatment

Magnesium Sulphate 2g 16mmol (4g) in 20mls 1st line management	2g /10mls (120ml/hr)	Intravenous bolus via IV infusion pump 	10ml over 5 minutes Repeat after 2 minutes if seizures persist Can be used during the maintenance dose.
Or Diazepam 5 - 10mg	5 -10mg (1-2mg/min)	Intravenous 	IV over 4 - 5 minutes (max.of 10mg)
Or Clonazepam 1 - 2mg	1- 2mg	Intravenous 	Give over 2-5 minutes

Magnesium Sulphate Overdose

Calcium Gluconate 1g	1g (10mls of 10% solution)	Intravenous Infusion – Using IV infusion pump (drug library) 	Give slowly minimum of 5 minutes Pump – Set @ 100ml/hr = 6-minute infusion (pump max.)
Diazoxide	See 4.3.1 page 13 QCG Clinical Guideline Hypertension disorders in pregnancy for administration/ use		
Labetalol	See 4.3.1 page 13 QCG Clinical Guideline Hypertension disorders in pregnancy for administration/ use		