

omeprazole

40mg injection, 2mg/mL oral mixture*, 10mg dispersible tablet

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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

Dose and Indications

Gastro-oesophageal reflux disease, oesophagitis or peptic ulceration

Intravenous infusion

0.5mg/kg once a day

May be increased to 1.5mg/kg once a day if acid production persists

Oral

0.5 to 1.5mg/kg once a day

Doses up to 3mg/kg have been used

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Preparation and Administration**Intravenous**There are **TWO STEPS** to this process.

STEP ONE: Add 10mL of sodium chloride 0.9% to the 40mg omeprazole vial and shake gently to dissolve (total of 10mL). The resulting solution contains 4mg/mL omeprazole.

STEP TWO: Further dilute 1mL of the 4mg/mL omeprazole solution with 9mL of compatible fluid (total of 10mL). The resulting solution contains 0.4mg/mL omeprazole.

Dose	0.5mg	1mg	1.5mg	2mg	2.5mg	3mg
Volume	1.25mL	2.5mL	3.75mL	5mL	6.25mL	7.5mL

Infuse over 20 to 30 minutes.

Oral Dispersible tablet

Doses should be rounded to the nearest 5mg

Patients with no feeding tube should receive the tablet dispersed in water as this is the most economical and convenient method, and is readily available in the community post discharge.

Place the required dose, either half or a whole 10mg tablet in the barrel of a syringe and disperse in 2-3mL of water. **DO NOT CRUSH**

Once dispersed, the dose must be given to the patient within 30 minutes.

Oral Mixture

The oral mixture contains 2mg/mL omeprazole.

Dose	1mg	2mg	3mg	4mg	5mg	6mg
Volume	0.5mL	1mL	1.5mL	2mL	2.5mL	3mL

*The 2mg/mL oral mixture is not commercially available however is manufactured at Women's & Children's Health Network Pharmacy, Flinders Medical Centre Pharmacy and on request at a compounding community pharmacy

Omeprazole oral mixture 2mg/mL must be used when a narrow bore feeding tube (TPT, NGT) is in place.

Omeprazole mixture should be stored in the refrigerator

Compatible Fluids

Glucose 5%, sodium chloride 0.9%, sodium chloride/glucose combinations

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Adverse Effects**Common**

Vomiting, diarrhoea, abdominal pain, constipation, flatulence

Infrequent

Rash

Rare

Thrombocytopenia, leucopenia, interstitial nephritis, peripheral oedema, raised liver enzymes, hepatitis, jaundice, skin reactions (including Stevens-Johnson syndrome, toxic epidermal necrolysis, photosensitivity), hypomagnesaemia, hypersensitivity reactions

Monitoring

- > Observe for symptomatic improvement within 3 days
- > Intraesophageal pH monitoring might be required to assess efficacy
- > Periodic full blood count and liver function tests with long term therapy.

Practice Points

- > Oral doses up to 3mg/kg have been used in resistant situations, but progressive drug accumulation may occur

Version control and change history**PDS reference:** OCE use only

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1.0	May 2013	current	Original version

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