

VASOPRESSIN – Hypotension in organ donors

(also known as argipressin or pitressin)

PRESENTATION:	Ampoules containing 20units/ml of vasopressin
INDICATION:	First line drug for management of hypotension associated with satisfactory filling pressures. If an additional vasoconstrictor is required to maintain SVR then low dose noradrenaline should be used.
DOSE AND ADMINISTRATION:	ICU STANDARD INFUSION 20units vasopressin made up to 50ml with glucose 5% Initial rate: 1.25ml/hr (0.5units/hr) titrated according to response up to 10ml/hr (4units/hr)
CONCENTRATION:	0.4units/ml
STABILITY:	Physically and chemically stable for 12 hours at room temperature.
ADDITIONAL INFORMATION:	Vasopressin has a low pH and may cause venous irritation and tissue damage in cases of extravasation. If a central venous access device is unavailable, administer via a large peripheral vein monitoring insertion site closely using a recognised phlebitis scoring tool. Re-site cannula at first signs of inflammation. Can be diluted in sodium chloride, however this is less stable and unlicensed.

References

- 1) Vasopressin, Injectable Medicines Guide, Last reviewed February 2020.
<https://medusa.wales.nhs.uk/IVGuideDisplayNewFormat.asp>. Accessed January 2021
- 2) Argipressin 20IU/ml, Advanz Pharma, Last updated February 2018,
- 3) Vasopressin, Micromedex. Accessed January 2021.
- 4) Organ Donation & Transplantation, NHS Blood & Transplant, Donor optimisation guideline for management of the brain-stem dead donor. 2012. Accessed January 2021
- 5) Organ-Protective Intensive Care in Organ Donors, Dtsch Arztebl Int. 2016 Aug; 113(33-34): 552–558. Accessed May 2021.

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