

OCTREOTIDE

PRESENTATION: 50micrograms in 1mL, 100microgram in 1mL or 500micrograms in 1mL ampoules.

INDICATION: Carcinoid Syndrome, reducing pancreatic secretions, reducing pancreatic hormone secretion and other endocrine disorders

DOSE AND ADMINISTRATION: See UKINETS bitesize guidance If unsure always consult with Endocrinology.

Subcutaneous injection

- Give undiluted.

Bolus intravenous injection

- Dilute each mL (any strength) with 1-9mL of sodium chloride 0.9%.

Continuous intravenous infusion

Concentration	Administration instructions	Administration rate
12.5micrograms/hr	300micrograms in 250mL of sodium chloride 0.9%	10mL/hr
25micrograms/hr	600micrograms in 250mL of sodium chloride 0.9%	10mL/hr
50micrograms/hr	1200micrograms in 250mL of sodium chloride 0.9%	10mL/hr

STABILITY: Physically and chemically stable for 24 hours.
Note: Sun Pharmaceutical Octreotide product expiry reduces to 8 hours at 25°C.

Critical Care Guidelines: OCTREOTIDE

Authors: Erin Fraser, Dr A Hurry

Document Version: 1

Authoriser: Lothian Critical Care Directorate QIT Editorial Board

Authorisation Date: January 2024

Review Date: January 2026

	Surgical / Interventional Radiology procedure not related to tumour	Minor procedure (surgery, biopsy, ablation) to primary tumour	Major Surgery / TAE on metastatic deposits or bulky primary tumour
Non-functioning NET	No Octreotide required	No Octreotide required	Octreotide 100ug IV On induction
History carcinoid syndrome Well controlled on SSA	No Octreotide required	Octreotide 100ug IV On induction	Octreotide 12.5ug/hr IV infusion 8-12 hours pre-operatively, 12-24 hours post procedure
Active carcinoid syndrome Frequent symptoms despite SSA	Octreotide 100ug IV On induction	Octreotide 12.5ug/hr IV infusion 8-12 hours pre-operatively, 12-24 hours post procedure	Octreotide 25ug/hr IV infusion 24 hours pre-operatively, then 24-48 hours post procedure
Active carcinoid syndrome Symptomatic/ significant carcinoid heart disease	Octreotide 12.5ug/hr IV infusion 8-12 hours pre-operatively, 12-24 hours post procedure	Octreotide 25ug/hr IV infusion 24 hours pre-operatively, then 24-48 hours post procedure	Octreotide 50ug/hr IV infusion 24 hours pre-operatively, then 72 hours post procedure

UKINETS bitesize guidance

Critical Care Guidelines: OCTREOTIDE	
Authors: Erin Fraser, Dr A Hurry	
Document Version: 1	Authoriser: Lothian Critical Care Directorate QIT Editorial Board
Authorisation Date: January 2024	Review Date: January 2026

References

1. UKINETS Bitesize guidance on periop management of Carcinoid syndrome
2. Woltering EA, Wright AE, Stevens MA, et al. Development of effective prophylaxis against Intra-operative carcinoid crisis. *Journal of Clinical Anesthesia* 2016; 32: 189–193
3. Condrón ME, Pommier SJ, Pommier RF. Continuous infusion of octreotide combined with perioperative octreotide bolus does not prevent intraoperative carcinoid crisis. *Surgery* 2016;159:358-67
4. Kinney MAO, Warner ME, Nagorny DM, et al. Perianaesthetic risks and outcomes of Abdominal Surgery for metastatic carcinoid tumours. *British Journal of Anaesthesia* 2001; 87(3):447-52
5. Castillo JG, Filsoofi F, Adams DH, et al. Management of patients undergoing multivalvular Surgery For carcinoid heart disease: the role of the anaesthetist. *British Journal of Anaesthesia* 2008; 101(5): 618-26
6. Injectable medicines guide – Octrotide (version 9). Available from [Injectable Medicines Guide - Display - Octreotide - Intravenous - Version 9 - IVGuideDisplayMain.asp](http://Injectable.Medicines.Guide-Display-Octreotide-Intravenous-Version-9-IVGuideDisplayMain.asp) (medusaimg.nhs.uk) Last updated 5/9/23. Accessed 3/11/23.
7. Summary of Product Characteristics – Octreotide 100micrograms/mL (Hospira). Available from: [Octreotide 100 micrograms/1ml Solution for Injection - Summary of Product Characteristics \(SmPC\) - \(emc\) \(medicines.org.uk\)](http://Octreotide.100micrograms/1ml.Solution.for.Injection-Summary.of.Product.Characteristics.SmPC-emc-medicines.org.uk) Last updated 15/06/22. Accessed 3/11/23.

Critical Care Guidelines: OCTREOTIDE	
Authors: Erin Fraser, Dr A Hurry	
Document Version: 1	Authoriser: Lothian Critical Care Directorate QIT Editorial Board
Authorisation Date: January 2024	Review Date: January 2026