

VASOPRESSIN – Hypotension in organ donors

(also known as argipressin or pitressin)

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| 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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