





ADULT

HYDRALAZINE

This document should be read in conjunction with this [DISCLAIMER](#)

Presentation	Ampoule (Powder for reconstitution): 20mg Tablet: 25mg
Dose	<p><u>Acute treatment of severe hypertension (third line)</u></p> <p>IV/IM injection: Initially 5-10mg (<i>5mg if fetal compromise</i>); 5 - 10mg may be repeated after 20 to 30 minutes if desired BP is not obtained; further doses are dependent on BP response</p> <p>IV infusion: Initially 200 – 300microg/minute, reducing rate when adequate response achieved. Maintenance: 50 - 150microg/minute</p> <p><u>Ongoing treatment of hypertension (second line)</u></p> <p>Oral: Initially 25mg twice a day. Titrate slowly according to response. Maintenance 50 - 200mg in daily divided doses.</p>
Administration	<p><u>IM Injection:</u></p> <p>Step 1 Reconstitution: Reconstitute vial with 1mL Water for Injections Step 2 Administration: Inject into the muscle. Onset is 10-30 minutes.</p> <p><u>IV Injection:</u></p> <p>Step 1 Reconstitution: Reconstitute as above Step 2 Dilution: Dilute the dose to 10mL with sodium chloride 0.9% Step 3 Administration: Inject SLOWLY over 2 to 10 minutes. Onset is 5-20minutes.</p> <p><u>IV Infusion:</u></p> <p>Step 1 Reconstitution: Reconstitute as above Step 2 Dilution: Dilute to 20mL with sodium chloride 0.9% (or dilute two reconstituted vials to 40mL). Concentration is 1mg/mL (1000microg/mL) Step 3 Administration: Infuse at prescribed rate</p>

	<p><u>Oral:</u> Take with or without food</p>
Pregnancy	<p>1st Trimester: Monitoring required 2nd Trimester: Monitoring required 3rd Trimester: Monitoring required</p>
Breastfeeding	Considered safe to use
Monitoring	<p>Severe hypertension defined as SBP \geq170 and/or DBP \geq110mmHg Continuous monitoring of BP and HR and continuous fetal monitoring is necessary Injection is given slowly to avoid precipitous decrease in mean arterial pressure (MAP) If more than 100mg daily dose is needed, the patient's acetylator status should be evaluated as it may provoke an SLE-like syndrome</p>
Clinical guidelines and policies	<p>Hypertension in Pregnancy - Medical Management Hypertension in Pregnancy - Midwifery Care Management of the woman with eclampsia Hypertension in Pregnancy: Magnesium Anticonvulsant Therapy Labour and birth suite QRG for hydralazine therapy Intravenous Medications - Procedure for Reconstitution and Administration Intravenous Medications - Labelling of Injectable Medicines and Fluids Standard Procedures for Reconstitution and Administration of Intravenous Drugs (Adults)</p>
References	<p>The Royal Women's Hospital. Hydralazine. In: Pregnancy and Breastfeeding Medicines Guide [Internet]. Parkville (Victoria): The Royal Women's Hospital; 2016 [cited 2017 May 12]. Available from: https://thewomenspbmg.org.au/</p> <p>Society of Hospital Pharmacists of Australia. Hydralazine. In: Australian Injectable Drugs Handbook [Internet]. [St Leonards, New South Wales]: Health Communication Network; 2017 [cited 2017 May 12]. Available from: http://aidh.hcn.com.au</p> <p>Australian Medicines Handbook. Hydralazine. In: Australian Medicines Handbook [Internet]. Adelaide (South Australia): Australian Medicines Handbook; 2017 [cited 2017 May 12]. Available from: https://amhonline.amh.net.au/</p> <p>MIMS Australia. Apresoline. In: MIMS Online [Internet]. St Leonards (New South Wales): MIMS Australia; 2016 [cited 2017 May 12]. Available from: https://www.mimsonline.com.au</p>

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