

NEONATAL

FLECAINIDE

This document should be read in conjunction with this **DISCLAIMER**

Highly Restricted: Requires Cardiologist approval before commencing

▲ HIGH RISK Medication

Although flecainide may be effective in supraventricular arrhythmias in patients with structural heart disease, its use has been associated with life threatening and occasionally fatal ventricular arrhythmias. Use with extreme caution, preferably after other antiarrhythmic drugs have been tried or considered inappropriate.

Presentation	Ampoule: 150mg/15mL = 10mg/mL Oral Suspension : 25mg/5mL (SAS) – PCH 2mg/mL (Prepared in Pharmacy) – KEMH		
Classification	Membrane stabilizing antiarrhythmic agent.		
Indication	Used for the suppression and prevention of ventricular arrhythmias and supraventricular tachycardia.		
	Used as a second-line agent where tachycardia has been resistant to first-line agents.		
Contraindication	Use caution in patients with congenital heart disease—increased potential for pro-arrhythmic effects		
	Cardiogenic shock		
	Hypersensitivity to flecainide or any component of the formulation		
	Second or third degree heart block without pacemaker		
	Right bundle branch block (when associated with a left hemiblock) without pacemaker		
Precautions	Correct pre-existing hypokalemia or hyperkalemia before administration		
	Use with caution in renal and hepatic impairment		

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Dose	Consult Cardiology				
	ORAL: (preferred route)				
	Initially 2mg/ kg/ dose every 12 hours				
	Adjust dose according to response and serum concentration				
	Maximum dose: 8mg/ kg /day				
	<u>IV:</u>				
	0.5mg/ kg/ dose				
	Maximum dose: 2mg/ kg				
Compatible Fluids	Glucose 5%				
Preparation	Oral:				
	PCH – Use SAS Formulation				
	KEMH - Use solution prepared in Pharmacy				
	If solution not available – prepare the following solution using 100mg flecainide tablets				
	 Dispense ONE flecainide tablet (100mg) in 10mL of water. Tablet will disperse within 1-2 minutes 				
	 Concentration is 100mg/10mL = 10mg/mL 				
	Discard any unused solution				
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	IV Infusion				
	Use undiluted				
Administration	Oral:				
/ tallillott attori	Separate from feeds as milk may reduce absorption of flecainide.				
	<u>IV:</u>				
	Infuse over 10 to 30 minutes				
	inuse over 10 to 30 minutes				
Adverse Reactions	Common: new or worsened arrhythmia, bradycardia, photopsia, dyspnoea				
	Serious: Cardiac arrest, cardiac dysrhythmia, cardiogenic shock, abnormal electrocardiogram, heart block, heart failure, prolonged QT interval, sinus node dysfunction, torsades de pointes, ventricular fibrillation, ventricular tachycardia				

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Monitoring	ECG, blood pressure, pulse, periodic serum concentrations after at least 5 doses when doses are started or changed		
	Time to reach steady state – 5-7 days		
	Reference Range:		
	Therapeutic trough plasma level 0.2 – 1 mg/L		
	Sampling time – prior to next dose		
Guidelines & Resources	Flecainide PCH		
Storage	Oral:		
	Store at room temperature		
	DO NOT refrigerate as crystallisation may occur		
	<u>IV:</u>		
	Store ampoule at room temperature		
Interactions	Flecainide interacts with a number of medications- consult Pharmacy for further advice.		
Notes	Milk reduces absorption of flecainide – monitor plasma trough flecainide levels with major changes in dietary milk intake.		
	SAS Forms are to be completed for Oral Suspension – PCH		
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