ACTIONS

Epinephrine is a sympathomimetic, which stimulates both alpha and beta-adrenergic receptors causing immediate bronchodilation, increase in heart rate and an increase in the force of cardiac contraction.

Subcutaneous dose lasts 5-15 minutes.

INDICATIONS (1:1,000)

1. Asthma.
2. Anaphylaxis.
3. Angioneurotic edema.

CONTRAINDICATIONS

Hyperthyroidism
Hypertension
Cerebral arteriosclerosis

Should not be administered in elderly or debilitated patients with underlying cardiovascular disease.

Physician contact is advised prior to administration in patients over 40 years old, known history of heart disease or hypertensive.

However in true anaphylactic shock there are no contraindications.
ADVERSE REACTIONS AND SIDE EFFECTS

Same as Epinephrine 1:10,000

CNS: Anxiety, headache, cerebral hemorrhage.

Cardio: Tachycardia, ventricular dysrhythmias, hypertension, angina, palpitations and Myocardial Infarction.

GI: Nausea and vomiting.

WARNINGS

Same as Epinephrine 1:10,000.

Epinephrine is inactivated by alkaline solutions - never mix with Sodium Bicarbonate.

Do not mix isoproterenol and epinephrine - results in exaggerated response.

Action of catecholamines is depressed by acidosis - attention to ventilation and circulation is essential.

Antidepressants potentiate the effects of epinephrine.

Also causes hyperglycemia.

Epinephrine 1:1,000 should not be given intravenously. It should be diluted first (1 mg in 9 ml of NS = 1:10,000 or 1 mg/10 ml).

DOSAGE

Adult: 0.3 - 0.5 mg (0.3 - 0.5 cc) subcutaneously.

May be repeated every 15 minutes x 3 as indicated.
If patient remains in anaphylaxis shock, consider IV administration of 0.3mg (1:10,000) solution over 3 minutes in 0.1 mg increments observing for response. (See Drug Summary 5.19.2- Epineprine 1:10,000).

**Pediatric:** 0.01 mg/kg up to 0.3 mg subcutaneously.