Aprotinin (Trasylol®)

Restricted for use under Cardiothoracic Surgery in Cardiac Theatre and Cardiac Intensive Care (CITU)	
Form	Trasylol® 10,000 KIU/ml, solution for injection or infusion (50ml vial) (Aprotinin 10,000 KIU is also known as Kallikrein Inhibitor Units – KIU (Aprotinin 500,000 KIU in 50mls)
Reconstitution	Already in solution
Compatibility and Stability	N/A Already in solution
Indication	Prophylactic use to reduce blood loss and blood transfusion in adult patients who are high risk of major blood loss in cardiac surgery
Administration & Dosing	Aprotinin must only be given to patients in the supine position via a central venous catheter. The same lumen should not be used for the administration of other medicinal products. Owing to the risk of allergic/anaphylactic reactions a 1ml (10,000 KIU) test dose is administered to all patients at least 10 minutes prior to the remainder of the dose. Following the negative test dose the dosing regimen is -A loading dose of 2 million KIU (200ml) is administered as a slow intravenous injection or infusion over 20 – 30 minutes, in theatre only, after induction of anaesthesia and prior to sternotomy -A further 2 million KIU (200ml) should be added to the pump prime of the heart-lung machine -The initial bolus infusion is followed by the administration of a continuous infusion of 500,000 KIU per hour until the end of the operation, this infusion may be continued in CITU for a maximum period of 3 hours on the instructions of a consultant surgeon or anaesthetist to assist the control of bleeding. In general the total amount of aprotinin administered per treatment course should not exceed 7 million KIU (i.e. 14 vials or 700mls)
Monitoring	Hypersensitivity reactions including anaphylaxis or anaphylactoid reactions. These include hypotension, pruritus, rash, urticarial, bronchospasm and nausea. If allergic reactions occur administration should be stopped immediately.
Extravasation	No information available
Additional Information	Aprotinin is physically incompatible with heparin. To avoid physical incompatibility of aprotinin and heparin when adding to the pump prime solution, each agent must be added during recirculation of the pump prime to assure adequate dilution prior to admixture with the other component

Information provided relates to Trasylol® manufactured by Nordic Group B.V and local expert opinion