

Hypertonic sodium chloride (for nebulisation)

(also known as Hypertonic saline)

Form	Mucoclear® 3% in 4ml solution Nebusal® 7% in 4ml solution	Store below 25°C
Reconstitution	In solution	
Indication	<p>Hypertonic sodium chloride is recommended for use in patients with a respiratory condition leading to retained bronchopulmonary secretions and where usual treatment (physiotherapy airway clearance, adequate systemic hydration, carbocisteine where indicated, dornase alpha for CF patients) is not sufficiently effective:</p> <p>Cystic Fibrosis (CF)</p> <p>Bronchiectasis (<i>for use prior to airway clearance to increase sputum yield, reduce sputum viscosity and increase ease of expectoration (BTS Bronchiectasis, 2019)</i>)</p> <p>Complex COPD/Asthma patients where above standard treatments are ineffective. Evidence of therapeutic value in patients with COPD comparative to CF/Bronchiectasis is currently lacking. Hypertonic saline may cause a reduction in lung function in COPD patients due to bronchoconstriction. Extra care should be taken in these patients</p>	
Mode of Action	Works to humidify/hydrate airways via osmotic effect, thereby mobilizing secretions in lower respiratory tract of patients with persistent mucus production/sputum plugging	
Contraindication	Contraindicated if initial test dose not tolerated by patient Should not be used in patients with haemoptysis	
Dosage	4ml of hypertonic sodium chloride 3% or 7% (contents of one nebulizer) to be inhaled twice daily (standard dosing) (Some centres use a 6% solution, not available in CUH, if prescribed please amend)	
Administration	<p>Nebulised via Nebulizer</p> <p>Hypertonic sodium chloride solution to be administered via a jet nebulizer i.e. Pari LC/Pari LC Sprint/Sidestream Plus with attached mouthpiece or facemask (mouthpiece preferable for hypertonic sodium chloride) and is driven by a compressor or supply of compressed air/oxygen. See Policy & Procedure on the Management of Adult Nebulizer Therapy in CUHG on QPulse for further guidance</p>	
Adverse effects/Warnings	<ul style="list-style-type: none"> Bronchospasm Temporary irritations (coughing, hoarseness) or reversible constriction of the bronchia may occur Suitability of the patient for treatment should be assessed using a test dose with lung function monitoring, particularly if the patient displays a tendency to develop dyspnoea or hypersensitivity 	
Interactions	<p>Hypertonic sodium chloride must not be mixed with any other nebulised drugs</p> <p>No known interactions with other medicines</p> <p>Due to its effect of increased bronchopulmonary clearance, it is advised not to inhale hypertonic sodium chloride immediately after other inhaled medications which need to remain in the airways to act (e.g. inhaled corticosteroids, nebulised antibiotics, dornase-alpha)</p>	
Additional Information	Vials for single use and for inhalation only	

This information has been summarised to act as a guide for those administering IV medication. The monograph should be used in conjunction with the drug data sheet and BNF for information on dose, adverse effects, cautions and contra-indications. Further information is available from Pharmacy on 22146 or 22542

	<p>Individuals should be advised to complete Airway Clearance in the following order, if prescribed:</p> <ul style="list-style-type: none"> – Bronchodilator – Mucoactive treatment i.e. hypertonic sodium chloride – Airway Clearance – Nebulised antibiotic and/or inhaled steroids
References	<p>Bronchiectasis in Adults British Thoracic Society Better lung health for all</p> <p>Nebulised 7% hypertonic saline improves lung function and quality of life in bronchiectasis</p> <p>A randomised double blind 13 week crossover trial of hypertonic saline (HTS) (6%) vs isotonic saline (ITS) (0.9%) in patients with bronchiectasis Thorax</p> <p>Inhaled hyperosmolar agents for bronchiectasis - PubMed</p> <p>Cystic fibrosis: Overview of the treatment of lung disease - UpToDate</p> <p>Mucus Clearance and Lung Function in Cystic Fibrosis with Hypertonic Saline</p>

Information provided relates to Mucoclear®(PARI) and Nebusal®(Accord)
Last updated 4/12/2025

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