

# ESMOLOL

SYNONYMS	Esmolol hydrochloride
BRAND NAME	BREVIBLOC
DRUG CLASS	Beta blocker
AVAILABILITY	Vial contains 100 mg/10 mL of esmolol hydrochloride. Also contains sodium acetate trihydrate, acetic acid and hydrochloric acid. <sup>1</sup> The solution is clear and colourless to light yellow. <sup>1</sup> Vial contains 2.5 g of esmolol hydrochloride. <sup>1</sup>
WARNING	After reconstitution the 2.5 g vial is 25 times the concentration of the 100 mg/10 mL vial and must be diluted before use. <sup>1</sup> Do not stop suddenly, gradually reduce the dose when stopping the infusion. <sup>1</sup> Extravasation may cause serious adverse effects including necrosis. <sup>1</sup>
pH	100 mg/10 mL vial: 4.5–5.5 <sup>1</sup>
PREPARATION	<b>For IV injection:</b> the 100 mg/10 mL vial is ready to use. <sup>1</sup> <b>For IV infusion:</b> the 2.5 g must be reconstituted <b>and diluted</b> before use. <sup>1</sup> Reconstitute the vial with 50 mL of sodium chloride 0.9%, glucose 5% or Hartmann's. The solution is clear and colourless. <sup>1</sup> Dilute to 250 mL with sodium chloride 0.9%, glucose 5% or Hartmann's to make a concentration of 10 mg/mL. <sup>1</sup>
STABILITY	Vial: store below 25 °C. <sup>1</sup> Infusion solution: stable for 24 hours below 25 °C or at 2 to 8 °C. <sup>1</sup>
ADMINISTRATION	
<b>IM injection</b>	Not recommended
<b>SUBCUT injection</b>	Not recommended
<b>IV injection</b>	<b>100 mg/10 mL vial only:</b> inject the loading dose over 1 minute. <sup>1</sup>
<b>IV infusion</b>	Use the 2.5 g vial to prepare a 10 mg/mL infusion solution. <sup>1</sup> See <i>PREPARATION</i> Start the infusion at a rate of 50 microgram/kg/minute and adjust the rate according to patient response. The maximum rate is 200 microgram/kg/minute. <sup>1,2</sup>
COMPATIBILITY	
<b>Fluids</b>	Glucose 5% <sup>1,3</sup> , Hartmann's <sup>1</sup> , Plasma-Lyte 148 via Y-site <sup>4</sup> , sodium chloride 0.9% <sup>1,3</sup> <b>100 mg/10 mL vial only:</b> glucose in sodium chloride solutions <sup>1,3</sup> , sodium chloride 0.45% <sup>1,3</sup>
<b>Y-site</b>	Amikacin <sup>3</sup> , aminophylline <sup>3</sup> , amiodarone <sup>3</sup> , ampicillin <sup>3</sup> , argatroban <sup>3</sup> , atracurium <sup>3</sup> , aztreonam <sup>5</sup> , bivalirudin <sup>3</sup> , buprenorphine <sup>5</sup> , calcium chloride <sup>3</sup> , calcium gluconate <sup>5</sup> , cefazolin <sup>3</sup> , cefotaxime <sup>5</sup> , cefoxitin <sup>5</sup> , ceftazidime <sup>3</sup> , ceftolozane-tazobactam <sup>3</sup> , ceftriaxone <sup>5</sup> , ciclosporin <sup>5</sup> , cisatracurium <sup>3</sup> , clindamycin <sup>3</sup> , dexmedetomidine <sup>3</sup> , dopamine <sup>3</sup> , ephedrine sulfate <sup>5</sup> , erythromycin <sup>3</sup> , ethanol <sup>6</sup> , fentanyl <sup>3</sup> , fluconazole <sup>5</sup> , gentamicin <sup>3</sup> , glyceryl trinitrate <sup>3</sup> , heparin sodium <sup>3</sup> , isavuconazole <sup>3</sup> , labetalol <sup>3</sup> , linezolid <sup>3</sup> , magnesium sulfate <sup>3</sup> , metronidazole <sup>3</sup> , micafungin <sup>3</sup> , midazolam <sup>3</sup> , morphine sulfate <sup>3</sup> , nicardipine <sup>3</sup> , noradrenaline (norepinephrine) <sup>3</sup> , potassium chloride <sup>3</sup> , ranitidine <sup>3</sup> , remifentanyl <sup>3</sup> , sodium acetate <sup>3</sup> , sodium bicarbonate <sup>5</sup> , sodium nitroprusside <sup>3</sup> , suxamethonium <sup>5</sup> , tobramycin <sup>3</sup> , trimethoprim-sulfamethoxazole <sup>3</sup> , vancomycin <sup>3</sup> , vecuronium <sup>3</sup> , verapamil <sup>5</sup> <i>continued over the page</i>

## INCOMPATIBILITY

**Fluids** Sodium bicarbonate 5%<sup>1</sup>

**Drugs** Aciclovir<sup>7</sup>, azathioprine<sup>7</sup>, cefalotin<sup>5</sup>, ciprofloxacin<sup>7</sup>, dexamethasone<sup>7</sup>, esomeprazole<sup>7</sup>, furosemide<sup>3</sup>, ganciclovir<sup>7</sup>, indometacin<sup>7</sup>, ketorolac<sup>7</sup>, milrinone<sup>7</sup>, phenobarbital<sup>7</sup>

## SPECIAL NOTES

Continuous cardiac monitoring is recommended.<sup>1</sup>

May cause hypotension, which usually reverses within 30 minutes of stopping the infusion or reducing the dose.<sup>1</sup>

Monitor the infusion site. Stop the infusion if there are signs of extravasation and take immediate and appropriate action.

Infusion solutions of concentrations greater than 20 mg/mL are associated with venous irritation and thrombophlebitis.<sup>1</sup>

## REFERENCES

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