

Atropine Sulfate

【IATR】 Atropine® 1mg/1mL/Amp

ATC Code : A03BA01

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中文名： 硫酸阿托品注射液 《信東》

適應症： 膽石症、幽門痙攣、胃酸過多、胃痙攣、有機磷化物、毛果芸香鹼中毒、診斷用散瞳、調節痙攣、乙醚等麻醉時之抑制支氣管分泌。

藥理分類： Anticholinergic Agent; Antidote; Antispasmodic Agent, Gastrointestinal

用法用量： **Administration: SC, IM, IV**

Indications and dosage regimen:

Antidote to anticholinesterase (e.g., organophosphate poisoning or carbamate poisoning):

— Adults:

1-2 mg IV (preferable) or IM, repeated every 2-60 minutes until muscarinic symptoms disappear. For severe cases, 2-6 mg may be given initially, repeating doses every 2-60 minutes.

— Children:

0.05 mg/kg IV (preferable) or IM up to an adult dose, repeated every 2-30 minutes until muscarinic signs and symptoms disappear.

Reversal of muscarinic activity, from agents used for neuromuscular blockade reversal:

— Adults:

0.6-1.2 mg IV for each 0.5-2.5 mg neostigmine methylsulfate or 10-20 mg of pyridostigmine bromide given. Administer concurrently with (but in a separate syringe) or a few minutes before the anticholinesterase agent.

— Neonates & Infants: IV

0.02- mg/kg dose of atropine sulfate concomitantly with each 0.04- mg/kg dose of neostigmine methylsulfate.

— Children: IV

0.01- to 0.04- mg/kg dose of atropine sulfate concomitantly with each 0.025- to 0.08- mg/kg dose of neostigmine methylsulfate.

Bradyarrhythmia:

— Adults:

0.5-1 mg IV every 3-5 min to total dose of 0.04 mg/kg.

IV doses < 0.5mg usually should not be used in adults, since paradoxical slowing of the heart rate may occur secondary to a dose-dependent (low dose) central vagal-stimulating effect of the drug.

— Children & Adolescents:

0.02 mg/kg, IV repeat once after 5 min; MAX 1 mg/dose in adolescents and 0.5 mg/dose in young children; MAX total dose 2 mg in adolescents and 1 mg in young children.

Preoperatively to decrease secretions and block cardiac vagal reflexes:

given 30-60 minutes before anesthesia.

— Adults: 0.4 mg (range: 0.2-1 mg) IM/IV/SC

— Children $\geq$ 20kg: 0.4 mg IM/IV/SC

— Children < 20kg: SC, 0.1 mg for 3 kg, 0.2 mg for 7-9 kg, or 0.3 mg for 12-16 kg.

Hypotonic radiography of the GI tract:

Adults, 1 mg IM.

GI anticholinergic effect:

— Adults: 0.3-1.2 mg IV/IM/SC every 4-6 hr.

— Children: 0.01 mg/kg SC, not to exceed 0.4 mg or 0.3 mg/m² every 4-6 hr.

不良反應：口乾、視力模糊、睫狀肌麻痺、散瞳、畏光、缺汗、尿滯留、心跳快速、心悸、便秘等。

注意事項：本劑勿使用於青光眼、前列腺肥大、甲狀腺機能亢進及鬱血性心衰竭的患者。

懷 孕 期：1. Atropine has been found to cross the human placenta (*Kanto 1981*).
2. In general, medications used as antidotes should take into consideration the health and prognosis of the mother; antidotes should be administered to pregnant women if there is a clear indication for use and should not be withheld because of fears of teratogenicity (*Bailey 2003*).
3. Medications used for the treatment of cardiac arrest in pregnancy are the same as in the non-pregnant woman. Appropriate medications should not be withheld due to concerns of fetal teratogenicity (*Jeejeebhoy [AHA] 2015*).

授 乳 期：1. 不建議使用。微量 atropine 會分泌至乳汁。
2. Trace amounts of atropine are present in breast milk.
3. Atropine may suppress lactation or cause adverse events in the breastfeeding infant (data is conflicting). The manufacturer recommends that caution be exercised when administering atropine to breastfeeding women.