## Pralidoxime

[IPAM] Pampara ® 500mg/20mL/Amp ATC Code: V03AB04

中文名: 把母巴拉注射液 《壽元化學》

適應症: 巴拉松 (Parathion) 甲基巴拉松 (Methyl Parathion) 等有機磷劑、農藥中毒之

解毒劑。

藥理分類: Antidote.

作用機轉: Reactivates cholinesterase that had been inactivated by phosphorylation due to

exposure to organophosphate pesticides and cholinesterase-inhibiting nerve agents (eg, terrorism and chemical warfare agents such as sarin) by displacing the enzyme from its receptor sites; removes the phosphoryl group from the active site of the inactivated

enzyme.

用法用量:Administration: IV

**Loading dose:** IV infusion over 15-30 min (preferred) or slow IV  $\geq$  5min.

**Maintenance dose:** Administer as a continuous or intermittent infusion at a rate not to exceed **200 mg/minute**.

## **Indications and dosage regimens:**

## **Organophosphate poisoning:**

**Note:** Must be used in conjunction with **atropine**; a response to atropine should be established before pralidoxime is administered.

- -Adults: initially, 1-2 g in 100 mL NS, at the same time as atropine, then continuous infusion 500 mg/hr.
- -Children: initially, 25-50 mg/kg; maintenance, 10-20 mg/kg/hr.

不良反應: 心跳過快、眩暈、視力模糊、頭痛、思睡、噁心、腹瀉、苦味、喉部痙攣。

懷 孕 期: 1.Animal reproduction studies have not been conducted. A case report did not show evidence of adverse events after pralidoxime administration during the second

trimester (Kamha 2005).

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).

授 乳 期: It is not known if pralidoxime is excreted in breast milk. The manufacturer

recommends that caution be exercised when administering pralidoxime to nursing

women

注意事項: 靜脈注射或以 NS 稀釋後靜脈滴注,靜脈滴注速度勿超過 200mg/min。

相容輸注液: NS

储 存: 避光儲存。