West of Scotland ORAL/ OTHER ROUTE Drug Monographs

Dexamethasone

All doses expressed as Dexamethasone Base

FORM Oral Solution 400micrograms/ml (2mg/5ml)

(Oral solution 100microgram/ml available on request for small doses)

INDICATION1. Bronchopulmonary Dysplasia (BPD) / Facilitating Extubation in a pre term infant

2. Cerebral Oedema

3. Treatment of post intubation laryngeal oedema

DOSE RANGE

1. BPD / facilitating Extubation in a preterm infant

LOW DOSE SCHEDULE (DART regimen)

| Day of treatment (inclusive) | DOSE | FREQUENCY | ROUTE |
|------------------------------|-----------------------|---------------|-------|
| 1 to 3 | 60 micrograms/kg/dose | 2 times daily | Oral |
| 4 to 6 | 40 micrograms/kg/dose | 2 times daily | Oral |
| 7 to 8 | 20 micrograms/kg/dose | 2 times daily | Oral |
| 9 to 10 | 8 micrograms/kg/dose | 2 times daily | Oral |

HIGH DOSE SCHEDULE (Consultant authorisation only)

| Day of treatment (inclusive) | DOSE | FREQUENCY | ROUTE |
|------------------------------|------------------------|---------------|-------|
| 1 to 3 | 200 micrograms/kg/dose | 3 times daily | Oral |
| 4 to 7 | 200 micrograms/kg/dose | 2 times daily | Oral |
| 8 to 14 | 200 micrograms/kg/dose | ONCE daily | Oral |

Day 15 onwards- if the response is good the course may be stopped. If the response is less than adequate, then the course should be continued at 200micrograms/kg/dose ONCE daily or on alternative days

ADDITIONAL DOSING INFORMATION

- For both dose schedules, the weight to be used to calculate the doses prescribed is to be the baby's weight at the start of therapy, unless the consultant instructs otherwise
- Regimens can be lengthened/ shortened/ repeated as clinically indicated
- The decision about the length of each section will be the responsibility of a Consultant Neonatologist/ Paediatrician
- If doses of 300micrograms/kg/day are given for more than 7 days OR doses of 150micrograms/kg/day are given for more than 14 days, LIVE vaccinations must be delayed until three months after stopping treatment as per the guidance in the green book.

2. Cerebral Oedema

| Age | DOSE | FREQUENCY ROUTE | |
|---------|----------------------|--------------------------------|------|
| Neonate | 250microgram/kg/dose | THREE times daily for 2-3 days | Oral |

3. Laryngeal oedema

| Age | DOSE | FREQUENCY | ROUTE |
|---------|----------------------|---|-------|
| Neonate | 200microgram/kg/dose | For 3 doses only* (at 8 hourly intervals) | Oral |

^{*} Dexamethasone should be given at least four hours before attempting extubation, then four hours after extubation. A final dose should then be administered 8 hours after second dose.



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CAUTIONS, CONTRA-INDICATIONS AND SIDE EFFECTS

- See Summary of Product Characteristics and most recent edition of BNF for Children (links below)

LICENSED STATUS Not licensed for use in BPD

LINKS BNF for Children: / Electronic Medicines Compendium

APPLICABLE POLICIES West of Scotland Neonatal Guidelines:

Consult local policy if applicable

| Document Number: | 002 | Supersedes: | 001 |
|------------------|--------------------|--------------|--------------|
| Prepared by: | WoS Neopharm group | Checked by | Maria Tracey |
| Date prepared | Aug 2016 | Date updated | June 2020 |
| Updated by | Peter Mulholland | Review Date | June 2023 |

Dose may vary depending on indication, age, renal function, hepatic function, and concomitant medications. This monograph should be used in conjunction with the package insert, BNF for Children, and Summary of Product Characteristics. For further advice contact your clinical pharmacist or pharmacy department.