MEPERIDINE

Health Canada approved products:

<table>
<thead>
<tr>
<th>Company</th>
<th>Brand Product</th>
<th>Strength</th>
</tr>
</thead>
<tbody>
<tr>
<td>SANOFI-AVENTIS CANADA INC.</td>
<td>DEMEROL</td>
<td>50 MG</td>
</tr>
<tr>
<td>Sandoz Canada Incorporated</td>
<td>MEPERIDINE</td>
<td>75 MG / ML</td>
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<tr>
<td>Sandoz Canada Incorporated</td>
<td>MEPERIDINE</td>
<td>50 MG / ML</td>
</tr>
<tr>
<td>Sandoz Canada Incorporated</td>
<td>MEPERIDINE</td>
<td>100 MG / ML</td>
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</tbody>
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Indications:

- Due to potentially severe adverse reactions, the use of meperidine for pain management is being discouraged. It is recommended that oral meperidine be removed from hospital pharmacy formularies.
- Injectable meperidine use should be restricted to:
  - Prevention and treatment of drug-induced or blood product-induced rigors (eg, amphotericin B, platelets)
  - Treatment of postoperative shivering
  - Short term pain management in individuals with normal renal, hepatic, and CNS function where alternative opioids are contraindicated (eg, drug allergy). Dose not to exceed 600 mg in 24 hours or duration of 48 hours.

Alternatives:

- For pain control, opioids such as morphine, hydromorphone and fentanyl.
- For shivering control, consider the following alternatives:
  - High efficacy, NNT = 3: ketamine 0.25–0.75 mg/kg (IV), 1 mg/kg (IM); dexmedetomidine 1 μg/kg (IV); granisetron 40 μg/kg (IV) to 3 mg (IV), and physostigmine 0.04 mg/kg to 2 mg (IV)
  - Moderate efficacy, NNT = 4: magnesium sulfate 4 g (IV), 50 mg to 500 mg (epidural)
  - Lower efficacy, NNT = 5 – 9: dexamethasone 0.6 mg/kg or 8 mg (IV), fentanyl 1.7 μg/kg (IV) 20–25 μg (epidural)

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References: