

SNS COLLEGE OF ALLIED HEALTH SCIENCES SNS Kalvi Nagar, Coimbatore - 35 Affiliated to Dr MGR Medical University, Chennai

DEPARTMENT OF CARDIO PULMONARY PERFUSION CARE TECHNOLOGY

COURSE NAME : Pharmacology Pathology and Clinical Microbiology II nd YEAR **TOPIC : SODIUM BICARBONATE**





Brand Name: <u>Sodium Bicarbonate</u> **Drug Class:** <u>Alkalinizing Agents</u>

• WHAT IS SODIUM BICARBONATE AND HOW DOES IT WORK?

•<u>Sodium bicarbonate</u> is indicated in the treatment metabolic <u>acidosis</u> which may occur in severe renal disease, uncontrolled <u>diabetes</u>, <u>circulatory</u> insufficiency due to <u>shock</u> or severe dehydration, <u>extracorporeal</u> <u>circulation</u> of blood, cardiac arrest and severe primary lactic acidosis. Sodium bicarbonate is further indicated in the treatment of including <u>barbiturates</u> (where <u>dissociation</u> of the barbiturate-protein complex is desired), in poisoning by salicylates or methyl alcohol and in <u>hemolytic</u> reactions requiring alkalinization of the urine to diminish nephrotoxicity of <u>hemoglobin</u> and its breakdown products. Sodium bicarbonate also is indicated in severe diarrhea, which is often accompanied by a significant loss of bicarbonate.



of certain drug intoxications,



Treatment of metabolic acidosis should, if possible, be superimposed on measures designed to control the basic cause of the acidosis - e.g., insulin in uncomplicated diabetes, blood volume restoration in shock. But since an appreciable time interval may elapse before all of the ancillary effects are brought about, bicarbonate therapy is indicated to minimize risks inherent to the acidosis itself.





Vigorous bicarbonate therapy is required in any form of metabolic acidosis where a rapid increase in plasma total CO2 content is crucial - e.g., cardiac arrest, circulatory insufficiency due to shock or severe dehydration, and in severe primary lactic acidosis or severe diabetic acidosis.





WHAT ARE DOSAGES OF SODIUM BICARBONATE?

Dosages of Sodium Bicarbonate: Adult and Pediatric Dosage Forms and Strengths

- Injectable solution
- 4%
- 4.2%
- 7.5%
- 8.4%
- ✤ Tablet
- 325 mg
- 650 mg



Cardiac Arrest



- Adult, Initial: 1 mEq/kg/dose intravenous (IV) x1; base subsequent doses on results of arterial <u>blood pH</u> and PaCO2 as well as calculation of the base deficit
 - Repeat doses may be considered in the setting of prolonged cardiac arrest only after adequate <u>alveolar ventilation</u> has been established
- Infants, under 2 years (use 4.2% solution)
- mEq/kg/min Initial: 1 given over lacksquareintravenous/intraosseous (IV/IO), THEN
 - 1 mEq/kg IV q10min of arrest
 - Not to exceed 8 mEq/kg/day
- Children over 2 years
 - Initial: 1 mEq/kg/dose intravenous (IV) x1; base subsequent doses on results of arterial blood pH and PaCO2 as well as calculation of the base deficit
 - Repeat doses may be considered in the setting of prolonged cardiac arrest only after adequate alveolar ventilation has been established



1-2 minutes



Hyperkalemia

- 50 mEq intravenous (IV) over 5 minutes Metabolic Acidosis (Non-Life-Threatening)
- acidosis as judged by the lowering of total CO2 content, clinical condition, and pH acidosis as judged by the lowering of total CO2 content, clinical condition, and pH
- Adult: 2-5 mEq/kg intravenous (IV) infusion over 4-8 hours depending on the severity of • Older children: 2-5 mEq/kg IV infusion over 4-8 hours depending on the severity of **Severe Metabolic Acidosis (Except Hypercarbic Acidosis)**

• 90 to 180 mEq/L (\sim 7.5-15 g) at a rate of 1-1.5 L (first hour); adjust for further management as needed

Administration

• Monitor: serum <u>potassium</u>





WHAT ARE SIDE EFFECTS ASSOCIATED WITH USING SODIUM **BICARBONATE?**

- Common side effects of sodium_bicarbonate include:
- Aggravated congestive heart failure (CHF)
- Cerebral <u>hemorrhage</u>
- Swelling (edema)
- High blood sodium levels
- Low blood calcium levels
- Low blood potassium levels
- <u>Muscle spasms</u> (associated with low calcium levels)
- Metabolic <u>alkalosis</u>
- **Belching**
- Bloating
- Excess fluid in the <u>lungs</u> (<u>pulmonary edema</u>) \bullet
- Hyperosmolality
- Intracranial acidosis
- Milk-alkali syndrome ullet





THANK YOU

