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|----------------------------------|--|------------|--|--------------|--|--|
| Title: | Levetiracetam for | Neonates | | Effective da | ate: gust 2020 | |
| Facilitator sign/date | Authorised sign/date | Authorised | sign/date | Version: | Page: 1 of 2 | |
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BRIEF ADMINISTRATION GUIDE

For detailed information refer to The Australasian Neonatal Medicines Formulary levetiracetam guideline

Indication: Seizures

Route: Intravenous, or oral

- Injection supplied as levetiracetam 500 mg in 5 mL (100 mg/mL) vial
 - pH 5.5
- Oral liquid supplied as 100 mg/mL

Note: Levetiracetam is not approved in NZ for children under 4 years so its use is considered "off-license"

Dose: Loading dose (including for status epilepticus): 40 mg/kg (range 15-50 mg/kg)

Maintenance dose: 10 mg/kg, starting 12 hours after the loading dose. Increase dose slowly as required (range 10-30 mg/kg, maximum 60 mg/kg/day)

0 to 7 days postnatal age administer 12 hourly, 8+ days administer 8-12 hourly

Notes:

- Reduce dose in renal impairment or severe hepatic impairment
- The oral dose should be the same as the intravenous dose (but monitor for seizure activity and adjust dose if required)
- If therapy is to be stopped levetiracetam should be withdrawn slowly

Preparation and administration:

<u>Intravenous</u>

- Draw up 3 mL of levetiracetam and add 17 mL of compatible fluid (sodium chloride 0.9% or glucose 5%) to make a final concentration of 300mg/20mL = 15 mg/mL
- Draw up the required volume for the dose and if desired dilute further with compatible fluid
- Infuse dose over **15 minutes** via Guardrail profiled syringe driver

Note: when treating **status epilepticus** dilute levetiracetam 1:1 and administer over 5 minutes as a slow IV push (not using Guardrails)

Oral

- Draw up prescribed dose of oral solution and administer.
 Note: if dose / volume is too small to measure take 1mL of levetiracetam solution and dilute to 10mL with water for injection to make a final concentration of 10 mg/mL, then take final dose from this.
- Can be diluted with water or milk and given with or without feeds

Monitoring:

- Watch for signs of hypersensitivity and adverse effects
- Monitor seizure activity: frequency, duration and severity
- Monitor fluid balance closely
- Routine vital signs including check for infection due to neutropenia
- Check renal function, LFTs, CBC

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Note: Serum levetiracetam levels are not routinely measured

Storage and Stability:

- Diluted solutions are stable for 24 hours when refrigerated (2 to 8°C) or 6 hours at room temperature.
- Once the oral solution bottle is opened discard after 7 months.

Competency for Administration

This procedure is carried out by, or under, the direct supervision of a registered nurse/registered midwife who holds current Waikato DHB Generic Medicine Management and IV certification plus Guardrails competency (if administering IV) as well as Neonatal specific competency NCV/NAC (if administering via CVAD).

Guardrails Information

Levetiracetam is Guardrail profiled on the CC pump for NICU. Following are the guardrail limits:

| Guardrails Drug Name | Levetiracetam LOAD* | | Levetircetam MAINT* | | | |
|----------------------|---------------------|-------|---------------------|-------|-------|--|
| Profile | 0.4-1kg | 1-5kg | 0.4-1kg | 1-2kg | 2-5kg | |
| Concentration(mg/ml) | | | | | | |
| Minimum | 3.75 | 5 | 1.2 | 3.1 | 5 | |
| Maximum | 16 | 16 | 16 | 16 | 16 | |
| Dose rate (mg/kg/hr) | | | | | | |
| Soft minimum | 40 | 40 | 20 | 20 | 20 | |
| Default | 160 | 160 | 40 | 40 | 40 | |
| Soft maximum | 162 | 162 | 120 | 120 | 120 | |
| Hard maximum | 200 | 200 | 122 | 122 | 122 | |

References

- Australasian Neonatal Medicines Formulary. Levetiracetam Drug Guideline. 2016. Available from:
 https://www.seslhd.health.nsw.gov.au/sites/default/files/migration/RHW/Newborn_Care/Guidelines/Medication/pdf/neo17levetiracetam.pdf
- Truven Health Analytics Inc. Pediatrics and Neofax®. 2019. Levetiracetam monograph. Accessed 26.3.2020.
 Available from: http://www.micromedexsolutions.com.
- New Zealand Formulary for Children (NZFC). Levetiracetam. Accessed 26.3.2020. Available from https://nzfchildren.org.nz/nzf 2641
- Phelps SJ, Hagemann TM, Lee KR, Thompson AJ. The Teddy Bear Book: Pediatric Injectable Drugs. 11th edition. American Society of Health-System Pharmacists; 2018.
- The Royal Children's Hospital Melbourne. Paediatric Injectable Guidelines. Accessed 26.3.2020. Available from https://pig.rch.org.au.
- Auckland DHB Newborn Services. Levetericetam Drug Protocol. February 2015. Available from http://www.adhb.govt.nz/newborn/DrugProtocols/LevetiracetamPharmacology.htm
- Nicholas SA et al. Levetiracetam for Treatment of Neonatal Seizures. J Clin Neurol 2011 Apr; 26(4): 465-470.
- Waikato DHB. Guardrails proposed database. 2020.

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