PrVASOPRESSIN INJECTION USP

20 USP pressor units/mL

Sterile

Antidiuretic Agent

Sandoz Canada Inc.
145, Jules-Léger
Boucherville, QC, Canada
J4B 7K8

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THERAPEUTIC CLASSIFICATION

Antidiuretic Agent

PHARMACOLOGY

Vasopressin Injection USP is a synthetic water-soluble pressor principle identical in sequence to arginine vasopressin.

Vasopressin exerts its antidiuretic action by increasing the reabsorption of water by the renal tubules. The drug also can cause contraction of smooth muscle of the gastrointestinal tract and of all parts of the vascular beds, especially the capillaries, small arterioles, and venules, with less effect on the smooth musculature of the large veins.

The direct effect on the contractile elements is neither antagonized by adrenergic blocking agents nor prevented by vascular denervation.

Vasopressin Injection USP is intended for intramuscular (IM) or subcutaneous (SC) injection.

INDICATIONS AND CLINICAL USE

Vasopressin Injection USP is intended for use in the prevention or treatment of postoperation abdominal distention, dispelling of gas shadows in abdominal roentgenography and symptomatic control of diabetes insipidus.

CONTRAINDICATIONS

Vasopressin should not be used in patients having cardiorenal disease with hypertension, advanced arteriosclerosis, coronary thrombosis, angina pectoris, epilepsy or toxemia of pregnancy. Anaphylaxis or hypersensitivity to the drug or its components are also contraindications.

Chronic nephritis with nitrogen retention may be a contraindication (see PRECAUTIONS).
WARNINGS

Vasopressin should not be used except with extreme caution in patients with vascular disease, especially disease of the coronary arteries. In such patients even small doses of the drug may precipitate anginal pain and with larger doses, the possibility of myocardial infarction should be considered.

Vasopressin may produce water intoxication. The early signs of drowsiness, listlessness, and headaches should be recognized to prevent convulsions and terminal coma.

PRECAUTIONS

Vasopressin should be used cautiously in the presence of epilepsy, migraine, asthma, heart failure, or any state in which a rapid addition to extracellular water may produce hazard for an already overburdened system.

Chronic nephritis with nitrogen retention contraindicates the use of vasopressin until reasonable nitrogen blood levels have been attained.

ADVERSE EFFECTS

Local or systemic allergic reactions may occur in hypersensitive individuals. The following side effects have been reported following the administration of vasopressin: tremor, sweating, vertigo, circumoral pallor, "pounding" in the head, abdominal cramps, passage of gas, nausea, vomiting, urticaria, bronchial constriction.

Anaphylaxis (cardiac arrest and/or shock) have been observed shortly after injection of vasopressin.

OVERDOSE

For management of a suspected drug overdose, contact your regional Poison Control Centre immediately.

DOSAGE AND ADMINISTRATION

The dosage of Vasopressin Injection USP should be individualized: 0.25 to 0.5 mL IM or SC at intervals of 3 to 4 hours, as required.

Children's dosages in proportion.
**Abdominal Distension:** Adults – 0.25 to 0.5 mL.

**Abdominal Roentgenography:** Adults – 0.5 mL given 2 hours and 0.5 hours before exposure of films.

**Diabetes Insipidus:** The dose by IM or SC injection is 0.25 to 0.5 mL repeated 2 or 3 times daily as required.

**DOSAGE FORMS, COMPOSITION AND PACKAGING**

Vasopressin Injection USP contains the pressor (8-L-arginine: vasopressin), and is an antidiuretic principle of the posterior lobe of the pituitary gland.

Each mL contains: Vasopressin 20 USP pressor units, chlorobutanol 5 mg as a preservative, sodium chloride for isotonicity, glacial acetic acid and/or sodium hydroxide to adjust pH and water for injection.

Vasopressin Injection USP is available in 2 mL multidose vials, boxes of 10, and 5 mL multidose vials, boxes of 1.

**STORAGE AND STABILITY**

Store between 15 and 25 °C. Discard within 28 days after initial use. Protect from light and heat. Do not freeze.

**LATEX FREE STOPPER:** Stopper contains no dry natural rubber.