

## NEONATAL MEDICATION PROTOCOLS

**HYALURONIDASE**  
Created by: NCCU  
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NCCU Clinical Guidelines  
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<b>DRUG:</b>	<b>HYALURONIDASE</b>
<b>PRESENTATION:</b>	Ampoule: Powder for reconstitution 1500 units
<b>ACTION &amp; INDICATION:</b>	Hyaluronidase is an enzyme that promotes the reabsorption of extravasated fluid by temporarily breaking down the hyaluronic acid of tissue cement. After administering hyaluronidase this tissue cement is broken down for 24 - 48 hours. The extravasated fluid is spread over a large absorptive area, but irritation is said to be minimised by dilution in tissue fluids.
<b>DOSE:</b>	<p><b>a) Infiltration of hyaluronidase alone into extravasation injury without Sodium Chloride 0.9% irrigation</b></p> <p>Hyaluronidase 1ml dose (15units/mL concentration) through existing IV cannula AND/OR Hyaluronidase 1mL dose in 5 aliquots of 0.2mL (300units/mL concentration) into the periphery of the extravasation injury.</p> <p><b>OR</b></p> <p><b>b) Infiltration of hyaluronidase into the extravasation injury followed by Sodium Chloride 0.9% irrigation</b></p> <p>Hyaluronidase 1mL dose in 5 aliquots of 0.2mL (1000units/mL concentration) around and through the extravasation injury. Followed by Irrigation with sodium chloride 0.9% as described in the protocol</p>
<b>PREPARATION:</b>	<p><b>See dose section above for concentration required.</b></p> <p><b>For 15 units/mL concentration</b> Dissolve the contents of ampoule in 1mL water for injections. Withdraw and dilute to 10mL (150Units/mL) Take 1mL (150Units/mL) of above dilution and further dilute to 10mL. Final concentration is 15units/mL</p> <p><b>For 300 units/mL concentration</b> Dissolve the contents of ampoule in 1mL of water for injections. Withdraw and dilute to 1.5mL. Take 0.3mL of this dilution and further dilute to 1mL (300Units/mL)</p> <p><b>For 1000units/mL concentration</b> Dissolve the contents of ampoule in 1mL of water for injections. Withdraw and dilute to 1.5mL. (1000units/mL)</p>
<b>ADMINISTRATION:</b>	Subcutaneous or intradermal injection
<b>ADVERSE EFFECTS:</b>	Not recommended for IV use
<b>COMMENTS:</b>	Do not use for extravasations of vasoconstrictive agents (eg dopamine, adrenaline, noradrenaline...see phentolamine ) Use within one hour for best results. Use only freshly prepared dilutions. Discard excess immediately after use.
<b>REFERENCES:</b>	NCCU Clinical Guidelines Section 5
<b>DATE:</b>	September 2013