

## Who can administer

May be administered by registered competent doctor or nurse/midwife

## Available preparations

DDAVP Desmopressin 4 microgram per 1ml ampoule

## Reconstitution

Already in solution

**Draw up using a 5 micron filter needle**

## Infusion fluids

Sodium chloride 0.9%

## Methods of intravenous administration

### **Intermittent intravenous infusion (preferred) (ref 1)**

- Add required dose to 50ml infusion fluid and administer over 20 minutes
- The residual volume in the infusion line must be flushed through at the same rate to avoid significant underdosing

### **Bolus intravenous injection**

- For the treatment of cranial diabetes insipidus only, but can also be given by subcutaneous or intramuscular injection
- Administer slowly over 3 to 5 minutes for intravenous injection (ref 1)

## Dose in adults

### **Mild to moderate haemophilia and Von Willebrands disease**

- Give 0.4 micrograms per kg (by intravenous infusion) as a single dose immediately before surgery or after trauma
- May be repeated at intervals of twelve hours

### **Treatment of cranial diabetes insipidus**

- Give 1 to 4 micrograms once daily (by subcutaneous, intramuscular or as a bolus intravenous injection)

### **Fibrinolytic response testing (ref 2)**

- Give 0.3 micrograms per kg by intravenous infusion (may also be given by subcutaneous injection)
- Blood sample to be taken after twenty minutes for fibrinolytic activity

## Monitoring

- As some patients have shown a diminishing response to successive doses, it is recommended that monitoring of Factor VIII levels should continue
- During infusion for haemostatic use, it is recommended that the patient's blood pressure is monitored continuously

Precautions to prevent fluid overload must be taken in:

- Conditions characterised by fluid and/or electrolyte imbalance
- Patients at risk of increased intracranial pressure

## Storage

Store between 2 to 8<sup>o</sup>C

## References

SPC July 2018

1. Injectable Medicines Guide Medusa, accessed online 08/02/2023
2. BNF 4 Sept 2022

## Therapeutic classification

Posterior pituitary hormones- antidiuretic