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PEDIATRIC DRUG DOSES



FOURTH EDITION

GL Chattri

Foreword
Avyakt Agarwal

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Colony-stimulating Factors

chapter 28

Colony-stimulating factors are secreted glycoprotiens that bind to receptor on the surfaces of hemopoietic stem cells, thereby activating intracellular signaling pathways that can cause the cells to proliferate and differentiate into a specific kind of blood cells (usually white blood cells, but red blood cells in case of erythropoietin). The new blood cells formed migrate into the bloodstream and perform there function.

ERYTHROPOIETIN/rHuEPO/EPO

Uses: Anemia of prematurity, neoplasia, end-stage renal disease, chemotherapy induced, associated with AIDS and its therapy.

Dosage: IV, SC—dosing schedules need to be individualized.

- Anemia of prematurity: 100–500 units/kg/dose, 3 times/week
- Chronic renal failure: 50–100 units/kg/dose, 3 times/week
- Cancer patients: 150 units/kg/dose, 3 times/week
- Human immunodeficiency virus (HIV) patients: 100 units/kg/dose, 3 times/week.

Brands: 2,000 and 4,000 IU/vial; Epotin, Hemax.

- Iron, vitamin B_{12}, folic acid deficiency limits marrow response and EPO may be ineffective and these need to be supplemented. Avoid shaking the vial as this may denature the glycoprotein rendering it ineffective. May cause hypertension (HT), headache, seizure, edema, arthralgia.

FILGRASTIM

Uses: Prevention of febrile neutropenia and associated infection in patients who have received bone marrow and antineoplastics for the treatment of non-myeloid malignancies. Management of severe chronic

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neutropenia. Reduction of time for neutrophil recovery and duration of fever in patient undergoing induction and consolidation chemotherapy for acute myelogenous leukemia. Neonatal neutropenia.

Dosage: After myelosuppressive chemotherapy—children: IV/SC—5 μg/kg/day as a single SC injection for up to 2 weeks or until absolute neutrophil count (ANC) reaches 10,000/m^3. Initiate at least 24 hour after chemotherapy. Dose may be increased by 5 μg/day during each cycle of chemotherapy, depending on blood counts.

- Neonatal neutropenia: IV/SC—5–10 μg/kg/day once daily for 3–5 days.

Brands: 300 μg/vial; Cytograf, Grafeel.

GRANULOCYTE COLONY-STIMULATING FACTOR (G-CSF)

Uses: Neonatal, congenital and idiopathic neutropenia; patients with malignancies receiving drugs associated with severe neutropenia and fever.

Dosage: IV, SC

- Neonates: 5 μg/kg/day for 3–5 days once daily
- Children: 5–10 μg/kg/day once daily for up to 14 days.

Brands: 300 μg/mL vial; Neupogen.

- Do not administer 24 hour prior to or within 24 hours following chemotherapy. After discontinuation of therapy ANC decreases by 50% within 2 days and return to re-treatment level within 1 week, White blood count (WBC) count return to normal range in 4–7 days.

GRANULOCYTE-MACROPHAGE COLONY-STIMULATING FACTOR (GM-CSF)

Uses: Acceleration of myeloid recovery from chemotherapy or marrow insult or after bone marrow transplantation, neutropenia of preterm, neutropenia following ganciclovir therapy.

Dosage:

- Neonates: 10 μg/kg/day once daily for 5 days
- Children: 250 μg/m^2/day once daily for 21 days.

Brands: 500 μg/mL injection; Leukine.

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PEGFILGRASTIM

Uses: To decrease the incidence of infection in patients with non-myeloid malignancies receiving myelosuppressive antineoplastics associated with a high-risk of febrile neytropenia.

Dosage: SC—children >45 kg: 6 mg/chemotherapy cycle.

Brands: 6 mg/vial; Neulastim, Peg-Grafeel.

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PEDIATRIC DRUG DOSES

Salient Features

- Useful and handy book
- Suitable for instant reference for dosing information in children
- Presents drug information in a consistent and user-friendly format
- Covers indications, generic names, brand names, usual doses, modes of administration, uses in combination, etc., of various drugs being used for children
- Besides drug dosages also includes information about feeding tubes, Foley catheter, endotracheal tube, oxygen masks and fluid resuscitation formula for burn patients, ventilator settings, etc.
- Serves as a practical convenient guide for all levels of health professionals dealing with pediatric population
- General guidelines for how to administer drugs in children and immunization in children is also given.

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