Ketamine
Palliative Care Shared Care Guideline

Introduction

Ketamine is a short acting anaesthetic with analgesic properties at low doses. It is used particularly for neuropathic pain, ischaemic limb pain and refractory cancer pain and as an adjunct to opioid therapy. The dose of opioid may need to be reduced when ketamine is initiated. Ketamine may be given orally or by continuous subcutaneous infusion via syringe pump either as a sole agent or in combination with other agents. Ketamine for these indications is unlicensed and should only be initiated by a Palliative Medicine Specialist.

Ketamine is a currently schedule 4 (part 1) controlled drug. (Under review)

Adult dosage and administration

Dose recommendation varies depending on oral or subcutaneous use and clinical response. Conversion between oral or subcutaneous should be managed under specialist palliative advice.

Oral Ketamine (as 50mg/5mL): Start at low doses such as 10-25mg three to four times daily. The dose and frequency can normally be increased in steps of 10-25mg up to a dose of 50mg four times daily. (Higher doses may be used with specialist guidance).

Use caution when calculating volume for administration: Incidents have been reported with oral ketamine as a result of confusion regarding the standard strength, particularly where lower doses are used and the dose is a small volume. For example a 10mg dose is 1mL of the 50mg/5mL oral solution, 25mg dose is 2.5mL of the 50mg/5mL oral solution. Ensure patients are counselled on measurement of the dose.

Subcutaneous Ketamine: Start with 50-100mg over 24hours using a syringe pump and increase by 50mg increments every 24hours until benefit is achieved. It is unusual to require doses greater than 500mg per day. When given via a syringe pump it can be irritant to the subcutaneous tissue. Dilute with sodium chloride 0.9% to the largest possible volume.

Use caution when calculating volume for administration: Incidents have been reported with subcutaneous ketamine as a result of confusion between the available preparations of ketamine injection.

Suitability in a Syringe Pump

Ketamine normally mixes well depending on concentration with diamorphine or morphine or oxycodone or haloperidol or metoclopramide or levomepromazine or midazolam in a syringe pump. Ketamine is incompatible with cyclizine. Ketamine is generally incompatible with dexamethasone but doses of 1mg dexamethasone (as sodium phosphate) or less may be added to syringe pump to prevent site irritation.

If more than two drugs are to be mixed in the same syringe please refer to the current Palliative Care Formulary www.pallcare.info or www.palliativedrugs.com or seek further specialist advice.

Available as

Preparations available: Subcutaneous Ketamine: Ketamine vials are available as 10mg/mL (20mL vial), 50mg/mL (10mL vial),100mg/mL (10mL vial). Orders should be made by contacting Customer Services at Pfizer (0845 6088866) or through Sangers Belfast (028 9040 4070).

Oral Ketamine Solution 50mg/5mL IS THE STANDARD STRENGTH THAT MUST BE USED. This is prepared on request. It is available to community pharmacists from wholesalers including Rosemont Pharmaceuticals (0800 919312), Martindale Pharmaceuticals (0800 137627) and Sangers NI (028 90401111). It may take up to 7 working days for delivery. It comes in a variety of flavours e.g. natural (aniseed) and peppermint, and in various sizes including 250mL, 300mL and 500mL. Note these preparations have no preservative and expire 28 days from opening. Please issue an oral syringe and adapter bung when dispensing. Use caution when calculating volume for administration.
Contraindications

Adverse Effects, Precautions and Contraindications

Common Drug Interactions

Communication

Responsibilities

Palliative Medicines Specialist Responsibilities

GP Responsibilities

For any queries relating to this patient’s treatment with ketamine, please contact the specialist named at the top of this document.

This information is not inclusive of all prescribing information and potential adverse effects. Please refer to the full prescribing data SPC, the BNF and the current Palliative Care Formulary. Information is also available at www.pallcare.info or www.palliativedrugs.com

Date prepared :24-02-2015 Date of review:24-02-2018