

ILE is indicated in refractory life-threatening cardiotoxicity secondary to local anaesthetic toxicity

Indications

- Cardiac arrest or refractory life-threatening toxicity due to local anaesthetics, after standard ACLS is commenced
- There is currently no evidence to support the use of ILE as first line / standard treatment of life-threatening toxicity associated with other drugs

Consider ILE as rescue therapy only in life-threatening cardiotoxicity caused by lipophilic cardio-toxins resistant to conventional treatment

ILE is not indicated in stable dysrhythmias or seizures

Contraindications:

- documented severe life-threatening allergy to soy bean or egg

Adverse effects:

- ECMO and dialysis filter dysfunction
- Interference with blood laboratory analysis
- Pancreatitis, acute lung injury/ARDS, fat embolism

Presentation

- Intralipid 20% emulsion in 500mL bottle / plastic bag

Dose and Administration

- Administer an initial bolus of 1.5 mL/kg IV over one minute
- Repeat (1.5 mL/kg IV bolus over one minute) every 5 minutes if no response to preceding dose, to a maximum of 8 doses
- Maximum cumulative total dose should NOT exceed 12 mL/ kg (8 doses)
- Discontinue once haemodynamic stability achieved OR maximum dose administered

** If a decision is made to administer ILE as rescue therapy in life-threatening cardiotoxicity caused by lipophilic cardio-toxins resistant to conventional treatment, then discuss with a clinical toxicologist*

Pregnancy: Safety not established. Administration should not be withheld if indicated.