



We discuss the withdrawal of NE in a hospice for a patient with advanced malignancy and profound hypotension from sepsis” Woods et al (2019).

Abstract:

Norepinephrine (NE) is a peripheral vasoconstrictor used as an emergency measure to restore blood pressure secondary to acute hypotension. NE must be administered centrally as a continuous infusion and requires intensive monitoring. Consequently, its use is restricted to critical care environments. We discuss the withdrawal of NE in a hospice for a patient with advanced malignancy and profound hypotension from sepsis. The patient was admitted to intensive care but chose to stop active treatment and insisted on being discharged. Due to concerns about withdrawing NE in the community, he was transferred to a local hospice. We describe various challenges, including the administration and monitoring of NE outside of intensive care, the withdrawal process and concerns that profound hypotension might compromise subcutaneous medications absorption.

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Reference:

Woods, E., Baker, L. and Hindmarsh, J. (2019) Norepinephrine pressor infusion withdrawal in a National Health Service hospice. *BMJ Supportive & Palliative Care*. September 28th. doi: 10.1136/bmjspcare-2019-001895. .

