

# Ketamine

Ketamine is used rarely in critical care and is reserved for use in those patients with severe asthma or bronchospasm who have not responded to accepted therapy

## Administration

Dilute 10mls of 100mg/ml solution (1g/10ml) with 40mls of sodium chloride 0.9% or glucose 5%. To give 50mls of 20mg/ml solution.

## Dose

- A starting dose of between 0.5mg to 1mg/kg/hour is suggested, increasing up to a maximum of 2.5mg/kg/hour
- Therapy should be commenced at 0.5mg/kg/hour in patients with a cardiovascular history
- Ketamine's adverse cardiovascular effects will increase as the dose increases. The dose should therefore be maintained at the minimal amount which provides an adequate response.

**To calculate dose in mg/kg/min use equation below or use table overleaf**

$$\text{Rate (mls/hour)} = \frac{\text{Dose (mg/kg/hour)} \times \text{Body weight (kg)}}{20 \text{ (concentration mg/ml)}}$$

## Cautions

Many patients on ketamine complain of vivid and disturbing dreams particularly when emerging from therapy. To minimise this ketamine should always be used with a small background dose of benzodiazepine for example 1mg/hour of midazolam or alternatively propofol could be used.

## Adverse effects

- Cardiovascular: cardiac output increased, hypertension, tachycardia. Paradoxical direct myocardial depression especially in stress or catecholamine deficient patients
- Psychiatric effects: hallucinations, vivid dream, delirium, confusion, agitation, flashback, dysphoria.
- GI: Hypersalivation, Nausea
- CNS: Nystagmus, hypertonia, tonic clonic movements
- Skin: Erythema
- Other: raised CSF pressure, raised intraocular pressure

