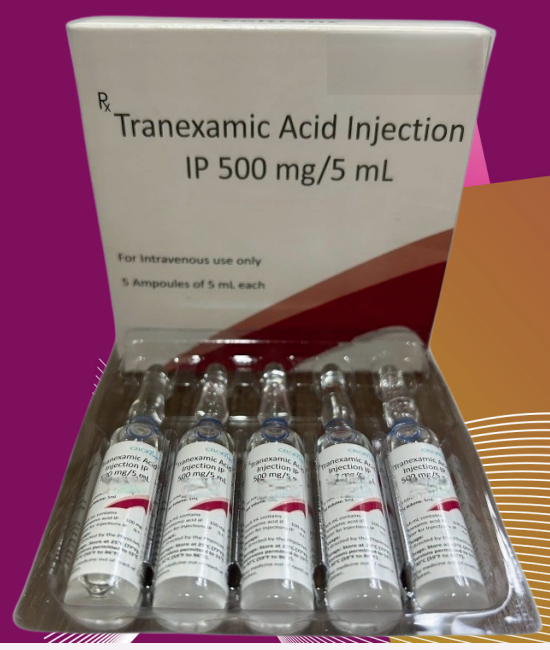
Unitaid
SAVE LIVES FASTER

AMPLI-PPHI Accelerating Measurable Progress and Leveraging Investments for PPH Impact



INJECTION TRANEXAMIC ACID (TXA)

Composition

1 ampoule contains 500 mg of tranexamic acid in 5 ml

Mechanism of action

TXA prevents clots from breaking down at the bleeding site

Absorption & Elimination

Rapid after intravenous infusion.
Half-life: approximately 3 hours.

Precaution

Risk of Medication Errors Due to Incorrect Route of Administration.

- IV injections should be given very slowly.
- Tranexamic acid should not be administered by the IM route.
- Special precaution in OT: medication error with Inj. Bupivacaine. Intrathecal administration may lead to seizures

Storage

Heat stable. Do not store above 30°C, Protect from light

Dose

- 1 gm i.e 10 mL intravenously over 10 minutes (1 ml/min).
- Give a second dose of TXA if bleeding continues 30 minutes after the first dose OR if bleeding restarts within 24 hours.

Contraindications

- Hypersensitivity to the active substance or to any of the excipients
- Acute venous or arterial thrombosis
- Fibrinolytic conditions
- Severe renal impairment (risk of accumulation)
- History of convulsions

Uses

- WHO & GoI strongly recommend early use of TXA in the treatment for PPH, within 3 hours of birth in addition to standard care
- For all women with clinically diagnosed PPH in all types of deliveries.
- Give as soon as possible to maximize benefits. Use beyond 3 hours of birth does not confer any clinical benefit.

Side effects

Most common adverse reactions are nausea, vomiting, diarrhea, allergic dermatitis, giddiness, hypotension, and thromboembolic events.

FOGSI

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Saving lives. Improving health. Transforming futures.