

## Local Protocol for Dyloject Injection (diclofenac 75mg/2ml) for post-operative pain

<b>1.</b>	<b>New medicine name:</b> Diclofenac sodium (Dyloject <sup>®</sup> ) Vials 75 mg/2 ml Solution for Injection.
<b>2.</b>	<b>Licensed indication(s):</b> Intravenous use: for treatment or prevention of post-operative pain in supervised healthcare settings.
<b>3.</b>	<b>Scottish Medicines Consortium advice:</b>  <b>Diclofenac (Dyloject<sup>®</sup>)</b> is accepted for restricted use within NHS Scotland for the treatment or prevention of post-operative pain by intravenous injection, in supervised healthcare settings. When given as an intravenous bolus, it showed non-inferiority to a comparator non-steroidal anti-inflammatory drug infusion at providing pain relief over an initial 4-hour period and caused less thrombophlebitis. The manufacturer's submission related only to intravenous use of diclofenac (Dyloject <sup>®</sup> ) in the post-operative setting. SMC cannot recommend its use by the intramuscular route.  <b>Medicines Advisory Group advice:</b> Hospital only – restricted use in theatres and surgical wards.
<b>4.*</b>	<b>Prescriber details:</b> Consultant Anaesthetists, Staff and Associate Specialist Anaesthetists or on the advice of the Acute Pain Service. Within NHS Tayside, these settings are limited to theatres and surgical wards on the advice of the Acute Pain Service.
<b>5.*</b>	<b>Criteria for patient selection:</b> Adults undergoing surgical intervention in the acute hospital setting. Maximum treatment duration is 2 days.
<b>6.</b>	<b>Administration details:</b> <b>CAUTION: Plasma levels of diclofenac following intravenous administration may be double that of the same dose given by the oral route since it is not subject to 50% first pass metabolism.</b>  Prevention of post-operative pain; a loading dose of 25mg to 50mg administered as a 5 to 60 second intravenous bolus injection after surgery. If necessary, treatment may be repeated after 4 to 6 hours, not exceeding 150mg within 24 hours. See <a href="#">Pain Management Guidelines</a> for advice on treatment of post-operative pain.  <b>Note: This preparation must not be confused with injectable Voltarol, which MUST NOT be given by IV bolus. As a safety measure Dyloject should be prescribed by brand name on the TPAR.</b>
<b>7.</b>	<b>Contra-indications:</b> Mild, moderate and severe renal impairment, history of, active or suspected GI ulcers or bleeding, adverse reactions or hypersensitivity to diclofenac or Dyloject's excipients, or hepatic inflammation to diclofenac, aspirin or other NSAIDs, concomitant NSAID or anticoagulant use (including low dose heparin), haemorrhagic diathesis, cerebrovascular bleeding, history of asthma, hypovolaemia / dehydration, pregnancy.

<p><b>8. Side-effects/cautions:</b> Epigastric pain, nausea, vomiting, diarrhoea, dyspepsia, flatulence, headache, dizziness, vertigo, jaw pain, rash, elevated liver enzymes, haemorrhage, thrombophlebitis. Elderly: Use lowest effective dose in frail elderly, low body weight and monitor for GI bleeding for 4 weeks after therapy.</p>
<p><b>9.* Monitoring - response to treatment:</b> Pain assessments. Maximum treatment duration is 2 days.</p>
<p><b>10.* Monitoring – treatment safety:</b> All patients should be monitored for signs / symptoms of GI disorders, GI bleeding, asthma, hypersensitivity reactions and renal impairment.</p>
<p><b>11.* Written by: Fiona B McIntyre, Principal Clinical Pharmacist, Critical Care, Fiona Cameron, Consultant Anaesthetist</b> <b>Date: July 2009</b></p> <p><b>Approved by: Dr Neil Mackenzie, Lead Consultant Anaesthetist</b> <b>Date: July 2009</b></p>
<p><b>12.* Review date: July 2011</b></p>

\* essential fields