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W ALVE

Urinary Alkalinizers in Hospital USM

The goal of urinary alkalinization is to achieve a urine pH of 7.5 or higher while maintaining a serum pH no higher than 7.55 to 7.60.(2)

	SODIUM CITRATE + CITRIC ACID (SODIUM CITRATE MIXTURE)	POTASSIUM CITRATE	POTASSIUM CITRATE + SODIUM CITRATE + CITRIC ACID (POLYCITRA)	SODIUM BICARBONATE (NaHCO3) 8.4%
Dosage equivalent	1.5 g / 5 ml + 0.25 g / 5 ml ⁽¹⁾ Each ml contains 3 mEq sodium and is equivalent to 3 mEq of bicarbonate (HCO3) ^(8, 9)	1080 mg/tab (10 mEq of potassium ion) ⁽¹⁾		NaHCO3 provides ~12 mEq each of sodium and
Dosage	Adult: Oral: 10 to 30 mEq bicarbonate 4 times daily. (6) Child: (6) Volume-based dosing: Children ≥2 years and Adolescents: Oral: 5 to 15 mEq bicarbonate per dose after meals and at bedtime Weight-based dosing (mEq bicarbonate/kg): Infants. Children, and Adolescents: Oral: 2 to 3 mEq bicarbonate/kg/day in 3 to 4 divided doses; adjust dose to targeted serum bicarbonate levels; typical adult doses do not exceed 30 mEq/dose	hypocitraturia (urinary citrate >150 mg daily): Initially, 10 mEq 3 times daily. Max: 100 mEq daily. Severe hypocitraturia (urinary citrate <150 mg daily): Initially, 20 mEq 3	water after meals and at bedtime (5) Child (5): Volume-based dosing: Children and Adolescents: Oral: 5 to 15 mL (10 to 30 mEq bicarbonate) per dose	

References

- ,50%20to%20150%20mEq%20sodium%20bicarbonate%20diluted%20in%201%20Leach%20of%20sodium%20and%20bicarbonate.

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