A more effective way to treat pediatric anxiety

Oral Suspension/Capsules Dosage: Under six years, 50 mg. daily in divided doses. Over six years, 50-100 mg. daily in divided doses.

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WHEN HYDROXYZINE HYDROCHLORIDE PARENTERAL SOLUTION IS ADMINISTERED INTRAVENOUSLY PARTICULAR ATTENTION SHOULD BE DIRECTED
TO INSURE THAT THE DRUG IS
INJECTED ONLY INTO THE VEIN
(INCLUDING ASPIRATION AND
PROPER ANATOMICAL SITE SELECTION) TO AVOID EITHER
INTRA-ARTERIAL INJECTION OR
EXTRAVASATION. The intravenous
administration should be accomplished
slowly, no faster than 25 mg, per minute, and not to exceed 100 mg. in any
single dose. In order to help avoid possible adverse effects it is recommended
that hydroxyzine parenteral solution be diluted to at least 50 cc.
with sterile normal saline and administered over a period of four
minutes or more preferably into the tubing of a running intravenous infusion.
Contraindications: Hypersensitivity to hydroxyzine. The paren-

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Contraindications: Hypersensitivity to hydroxyzine. The parenteral solution, for intramuscular or intravenous use, must not be injected subcutaneously or intra-arterially.

Hydroxyzine, when administered to the pregnant mouse, rat, and rabbit induced fetal almormalities in the rat at doses substantially above the human therapeutic range. Clinical data in human beings are inadequate. Until adequate data are available to establish safety in early pregnancy, hydroxyzine is contraindicated during this period.

Precautions: Hydroxyzine may potentiate the action of central nervous system depressants such as narcotics and barbiturates. In conjunctive use, dosage for these drugs should be decreased as much as 50%. Because drowsiness may occur, patients should be cautioned against driving a car or operating dangerous machinery. The usual precautions for intramuscular injection should be followed; soft-tissue reactions have rarely been reported when proper technique has been used. Hydroxyzine parenteral solution for intramuscular use should be injected well within the body of a relatively large muscle. In adults, the preferadity the mid-lateral muscle of the thigh. In infants and small children, preferably the mid-lateral muscle of the thigh. In infants and small children, preferably the mid-lateral muscle of the thigh. In infants and small children, preferably the mid-lateral muscle of the thigh. In infants and small children the upper outer quadrant of the gluteal region should only be used when necessary, as in the possibility of damage to the sciatic nerve. The deltoid area should be used only if well developed, such as in certain adults and older children, and only with caution to avoid radial nerve injury. Injections should not be made in the lower and middle thirds of the upper arm. Aspiration



should be done to help avoid intravascular injection. On reported intravenous injection a few instances of digital gangrene have occurred distal to the injection site, considered to be due to inadvertent intra-arterial injection or possibly periarterial extravasation. WHEN HYDROXYZINE HYDROCHLORIDE PARENTERAL SOLUTION IS ADMINISTERED INTRAVENOUSLY PARTICULAR ATTENTION SHOULD BE DIECTED TO INSURE THAT THE DRUG IS INJECTED ONLY INTO THE VEIN (INCLUDING ASPIRATION AND PROPER ANATOMICAL SITE SELECTION) TO AVOID EITHER INTRA-ARTERIAL INJECTION OR EXTRAVASATION. Intravenous administration should be

EITHER INTRA-ARTERIAL INTJECTION OR EXTRAVASATION.
Intravenous administration should be accomplished slowly, no faster than 25 mg. per minute, and not to exceed 100 mg. in any single dose. In order to help avoid possible adverse effects it is recommended that hydroxyzine parenteral solution be diluted to at least 50 cc. with sterile normal saline and administered over a period of four minutes or more, preferably into the tubing of a running intravenous affusion.

The intravenous administration of this drug is not recommended for children under 12 years of age.
Adverse Reactions: Drowsiness may occur; if so, it is usually transitory and may disappear in a few days of continued therapy or upon dosage reduction. Dryness of the mouth may occur with higher doses. Involuntary motor activity, including rare instances of tremor and convulsions, has been reported, usually with higher than recommended dosage.

When this product is given intravenously undiluted, minimal amounts of intravascular hemolysis occur at the site of injection. Giving the maximum recommended intravenous dose (100 mg.) to adulta results in immediate transient hemolysis with the liberation of a total of 2-3 grams of hemoglobin, which, in some individuals, can cause small amounts of hemoglobinumia. This compares with the normal red cell destruction from which approximately 8 Gm. of hemoglobin are liberated every 24 hours. If the hydroxyzine is diluted with 60 cc. of normal saline and given during a period of four minutes or more, this phenomenon does not occur.

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Supply: Vistaril (hydroxyzine pamoste) Capsules: Equivalent to 25 mg., 50 mg., 100 mg. hydroxyzine HCl. Vistaril (hydroxyzine pamoste) Oral Suspension: Equivalent to 25 mg. hydroxyzine HCl per 5 cc. teaspoonful. Vistaril (hydroxyzine HCl) per 10 cc. vial and 50 mg./cc.—2 cc. and 10 cc. vial; Isoject, 25 and 50 mg. per cc., 1 cc. per unit, 100 mg./2 cc. unit.

Pfizer

LABORATORIES DIVISION

More detailed professional information available on request.