

recommended in a dose of 15 mg./kg./hr. in 5 percent dextrose in water, the total not to exceed 60 mg./kg./day. A continuous electrocardiogram should be observed so that the infusion can be stopped promptly when the desired effect is achieved.

DOSAGE AND ADMINISTRATION

Digitalization must be individualized. Generally, premature and immature infants are particularly sensitive permitting reduced dosage which must be determined by careful titration.

Oral dosage. Newborn (normal), from birth to 1 month, require adult proportions by body weight.

Infants, 1 month to 2 years require approximately 50 percent more by body weight than adult proportions.

Children, 2 years and over require adult proportions by body weight.

(Complete by adding dosage for the specific preparation.)

Long term use of digitalis is indicated in almost all infants who have been digitalized for acute congestive failure unless the cause is transient. Many favor maintaining digitalis until at least 2 years of age in all infants with paroxysmal atrial tachycardia or who show either definite or latent failure.

Many children with severe inoperable congenital defects need digitalis throughout childhood and often for life.