



ADR

Tip of the Month

Fentanyl-induced muscular rigidity

Analgesia is an important component of pain management in newborn care. Intravenous administration of fentanyl carries the risk of thoracic muscular rigidity, leading to inadequate ventilation, severe hypoxemia, respiratory acidosis, secondary bradycardia and hypotension, and death.

Physicians should:

- Have resuscitative equipment readily available.
- Give slow bolus fentanyl injection.
- Respond rapidly to first signs of respiratory or cardiovascular effects by the use of:
 - ◆ Assisted or controlled mechanical ventilation.
 - ◆ A specific narcotic antagonist to reverse the apnea, e.g. naloxone.
 - ◆ A neuromuscular blocking agent compatible with the patient's condition to eliminate the diaphragm and intercostal rigidity.
 - ◆ An anticholinergic medication to counteract the bradycardia, e.g. atropine.
- Provide longer surveillance to ensure the effects of fentanyl have completely disappeared.

***Please report all serious
adverse drug reactions (ADRs).***