



Anaphylaxis algorithm

Anaphylactic reaction?

Airway, Breathing, Circulation, Disability, Exposure

Diagnosis - look for:

- Acute onset of illness
- Life-threatening Airway and/or Breathing and/or Circulation problems¹
- And usually skin changes

- Call for help
- Lie patient flat
- Raise patient's legs

Adrenaline²

When skills and equipment available:

- Establish airway
- High flow oxygen
- IV fluid challenge³
- Chlorphenamine⁴
- Hydrocortisone⁵

Monitor:

- Pulse oximetry
- ECG
- Blood pressure

1 Life-threatening problems:

Airway: swelling, hoarseness, stridor

Breathing: rapid breathing, wheeze, fatigue, cyanosis, SpO₂ < 92%, confusion

Circulation: pale, clammy, low blood pressure, faintness, drowsy/coma

2 Adrenaline (give IM unless experienced with IV adrenaline)

IM doses of 1:1000 adrenaline (repeat after 5 min if no better)

- | | |
|-----------------------------|-----------------------------|
| • Adult | 500 micrograms IM (0.5 mL) |
| • Child more than 12 years: | 500 micrograms IM (0.5 mL) |
| • Child 6 -12 years: | 300 micrograms IM (0.3 mL) |
| • Child less than 6 years: | 150 micrograms IM (0.15 mL) |

Adrenaline IV to be given **only by experienced specialists**

Titrate: Adults 50 micrograms; Children 1 microgram/kg

3 IV fluid challenge:

Adult - 500 – 1000 mL

Child - crystalloid 20 mL/kg

Stop IV colloid
if this might be the cause
of anaphylaxis

4 Chlorphenamine (IM or slow IV)

| | |
|-----------------------------------|-------------------|
| Adult or child more than 12 years | 10 mg |
| Child 6 - 12 years | 5 mg |
| Child 6 months to 6 years | 2.5 mg |
| Child less than 6 months | 250 micrograms/kg |

5 Hydrocortisone (IM or slow IV)

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|--------|
| 200 mg |
| 100 mg |
| 50 mg |
| 25 mg |

See also: ► Anaphylactic reactions – Initial treatment