

Guidelines



Adrenaline (Epinephrine) Injector Prescription Summary of 2022 Updates

ASCIA Adrenaline (Epinephrine) Injector Prescription Guidelines have been updated in 2022 to provide the latest information to support the appropriate prescription and dose of adrenaline injectors for use in non-medical settings, for the emergency first aid treatment of potentially life-threatening severe allergic reactions (anaphylaxis). The three main updates are outlined in this summary.

UPDATE 1: ASCIA recommends the use of adrenaline as the first line treatment for anaphylaxis using either of the following two brands of adrenaline injectors:

- EpiPen® (150 and 300 microgram) TGA approved and available in Australia on the PBS (up to two
 devices per prescription), and available in New Zealand.
- Anapen® (150, 300 and 500 microgram) TGA approved and available in Australia on the PBS (up to two devices per prescription).

If you do not want brand substitution, it is important to specify brand and tick box on PBS prescription. EpiPen® and Anapen® are also available without prescription.

Neither brand is currently rebated by Pharmac in New Zealand.

UPDATE 2: Both EpiPen® and Anapen® devices are widely used in other countries. Multiple brands of devices are available in most countries, and this is important for the following reasons:

- To ensure continued supply of life saving adrenaline, particularly if one brand has stock shortages.
- To provide doctors with a choice of dose, who may prefer to prescribe a higher dose (500 microgram device) for people over 50kg.
- A 500 microgram dose can potentially prevent the need for further doses of adrenaline (which is
 important due to increasing ambulance delays and many people only carrying one device).
- To encourage suppliers to provide devices with longer shelf life.
- To provide choice for consumers to access devices with points of difference to best suit their needs.

UPDATE 3: ASCIA recommends the adrenaline injector doses listed below, which are consistent with several publications. These include the Acute Anaphylaxis Clinical Care Standard for Australia, Australian Prescriber Anaphylaxis wallchart, Australian Immunisation Handbook and international recommendations from the World Allergy Organisation (WAO), Canada and the UK. Children 7.5-20kg (aged around one to five years):

• EpiPen® Jr (150 microgram) or Anapen® 150 (Jr) (150 microgram)

Adults and children over 20kg (aged around five years or over):

• EpiPen® (300 microgram) or Anapen® 300 (300 microgram)

Adults and children over 50kg (aged around twelve years or over):

New *Anapen® 500 (500 microgram) or Anapen® 300 (300 microgram) or EpiPen® (300 microgram).

*The dose of adrenaline in Anapen® 500 is consistent with the intramuscular injection (IMI) dose recommendations for people who weigh more than 50kg in the publications listed on www.allergv.org.au/hp/anaphylaxis/adrenaline-injector-prescription

ASCIA guidelines should be used in conjunction with clinical judgement, with consideration of issues that include training on a new device and preference of device from the patient or their carer.

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