

Captopril

FORM Oral Solution 5mg/ml (to be reconstituted)

INDICATION Hypertension
Congestive Cardiac Failure

DOSE RANGE

N.B. The neonatal response to treatment with ACE inhibitors is very variable, and some neonates develop profound hypotension with even small doses; a test- dose should be used initially and increased cautiously

AGE	DOSE	FREQUENCY	ROUTE
Neonate	10 to 50microgram/kg (10 microgram/kg in neonate less than 37 weeks postmenstrual age)	Single Test Dose*	Oral
	If tolerated, give 10 to 50 microgram/kg/dose and increased as tolerated/required by 100microgram/kg/dose to a max of 2mg/ kg daily in divided doses** N.B. (max 300microgram/ kg/ daily in divided doses in neonate less than 37 weeks postmenstrual age)	2 - 3 times daily	Oral
1 month – 6 months	100 microgram/kg	Single test dose*	Oral
	If tolerated, give 100 – 300 microgram/kg/dose and increase as tolerated/ required to max. 4mg/kg daily in divided doses	2 or 3 doses daily	Oral

* Monitor blood pressure every 15minutes for 1 to 2 hours during test dose.

** Higher doses of up to 1mg/kg/dose have been used in neonates in conditions such as dilated cardiomyopathy with intractable heart failure - doses exceeding 500microgram/kg/dose should not be used without Consultant approval. Discussion of such cases with a Cardiologist is advised

CAUTIONS, CONTRA-INDICATIONS AND SIDE EFFECTS

- See Summary of Product Characteristics and most recent edition of BNF for Children (links below)

STORAGE

Follow directions on side of bottle for reconstitution.
Once reconstituted, the solution is stable for 21 days at room temperature.

FURTHER INFORMATION

- For doses less than 500micrograms the 5mg/ml oral solution should be diluted as follows

Captopril 5mg/ml oral solution	0.4ml
Water for Injection	Up to 20ml

Resulting Solution 2mg in 20ml (100micrograms/ml)

West of Scotland ORAL/ OTHER ROUTE Drug Monographs

SPECIAL MONITORING

- Continuous Cardiac monitoring
- BP Monitoring (every 15 mins after initial dose and hourly thereafter until a stable upper dose is established)
- U&E's following initiation of treatment and repeat when dose is stabilised
- Monitor WBC every 2 weeks for first 3 months of treatment (Risk of neutropenia)
- Check urine for protein monthly for first 9 months of treatment

LICENSED STATUS

Licensed for all ages

LINKS

[BNF for Children:](#) / [Electronic Medicines Compendium](#)

APPLICABLE POLICIES

[West of Scotland Neonatal Guidelines:](#)

Consult local policy if applicable

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Prepared by:	Hazel Fisher	Checked by	WoS Neonatal Pharmacists
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Dose may vary depending on indication, age, renal function, hepatic function, and concomitant medications.
This monograph should be used in conjunction with the package insert, BNF for Children, and Summary of Product Characteristics. For further advice contact your clinical pharmacist or pharmacy department.