

PUSH IT REAL GOOD: IV THIAMINE

SITUATION

- OLOLRMC is transitioning away from the routine use of “banana bags” in patients with chronic alcohol use disorder (AUD)



BACKGROUND

- Patients with chronic AUD commonly present with neurologic sequelae related to Wernicke’s encephalopathy (WE) and Korsakoff syndrome (KS) which result secondary to a deficiency in thiamine



ASSESSMENT

- No evidence exists to support “banana bag” use in patients with AUD
- Data supports the use and safety of IV push thiamine at doses \leq 200mg



Study	Intervention	Results
McLaughlin K, et al. (2019)	100 – 500 mg thiamine IV push over 1-2 mins	26/5560 (0.47%) injection site reaction
Tjugum S, et al. (2019)	100 – 500 mg thiamine IV push or infusion	3/1003 (0.3%) adverse reaction with IV push
Wren K, et al. (1989)	100 mg thiamine IV push over \leq 10 seconds	12/1070 (1.1%) injection site reaction



RECOMMENDATION

- **IV Push over 1 minute**
 - **Thiamine 100 – 200 mg**
 - For suspected or proven WE, ideal dose of thiamine is 200 – 500 mg 3x/day
- Infuse does $>$ 200 mg over 30 minutes



References:

McLaughlin K, et al. Crit Care Med Jan 2019;47 (Suppl 1):641.
Tjugum SL, et al. J Pharm Pract. 2019;;897190019872584.
Wrenn KD, et al. Ann Emerg Med. 1989;18(8):867-70.