METHOXYFLURANE "PENTHRANE"

Presentation

3 ml glass bottle with plastic seal

Pharmacology

Inhalational analgesic agent at low concentrations
Central nervous system depressant

Metabolism

Excreted mainly by the lungs
By the liver

Primary Emergency Indication

Pre-hospital pain relief

Contraindications

Pre-existing renal disease / renal impairment
Concurrent use of tetracycline antibiotics
Exceeding total dose of 6ml in a 24 hour period

Precautions

The "Penthrox"™ inhaler must be hand-held by the patient so that if unconsciousness occurs it will fall from the patient’s face. Occasionally the operator may need to assist but must continuously assess the level of consciousness
Pre-eclampsia

Route of Administration

Self-administration under supervision using the hand held "Penthrox"™ Inhaler with oxygen supplementation

Side Effects

Drowsiness
Decrease in blood pressure and bradycardia (rare)
Exceeding the maximum total dose of 6ml in a 24 hour period may lead to renal toxicity

Special Notes
The maximum initial priming dose for Methoxyflurane is 3ml. This will provide approximately 25 minutes of analgesia and may be followed by one further 3ml dose once the initial dose has expired if required. Analgesia commences after 8-10 breaths and lasts for approximately 3-5 minutes once discontinued.

Concurrent administration of 3LPM of Oxygen through the Inhaler provides an inspired Oxygen concentration of approximately 35%, whilst 8LPM provides in excess of 50%.

Methoxyflurane should not be administered in confined spaces (eg. In road and air ambulances) unless the ‘Penthrox Analgiser’ is fitted with a scavenging system.

Instructions to patient: After Methoxyflurane administration patients should be cautioned not to drive motor vehicles or operate hazardous machinery or engage in hazardous sports for 24 hours.

**CPG Information**

- CPG Number: D020
- Version: 1
- Updated: 01/08/07

**CPG Links**

- [ACUTE CORONARY SYNDROMES (ADULT)]
- [PAIN RELIEF - NON CARDIAC]
- [PAIN RELIEF (PAEDIATRIC)]