

# **Tranexamic Acid** (Cyklokapron)

**Indication(s):** Patient with overt or suspected major trauma when there is confirmed or suspected requirement for fluid resuscitation.

**Contraindications:** Hypersensitivity to tranexamic acid (TXA); Do not administer  $\geq 3$ hrs after initial injury.

**Precautions:** Gastrointestinal symptoms (nausea, vomiting, and diarrhea) occur but disappear when the dose is reduced. Tranexamic acid may cause dizziness and therefore may influence the ability to drive or use machines. Use with caution in patients with upper urinary tract bleeding, ureteral obstruction due to clot formation has been reported. Allergic dermatitis has been reported albeit less commonly.

**Drug Interactions:** Few studies of interactions between CYKLOKAPRON and other drugs have been conducted.

**Adverse effects:** Isolated cases of dizziness or reduced blood pressure have been reported. Venous and arterial thrombosis or thromboembolism has been reported. Use with caution in patients with thromboembolic disease.

**Pharmacology:** Tranexamic acid forms a reversible complex that displaces plasminogen from fibrin resulting in inhibition of fibrinolysis; it also inhibits the proteolytic activity of plasmin.

**Dosage and Administration:** Tranexamic acid 1 gram IV/IO, followed by an additional 1 gram IV/IO 1 hour after initial dose.