

Haloperidol

Classification

Antipsychotic

Indications

- CCP: Emergency sedation of severely agitated or delirious patients

Contraindications

- Hypersensitivity to haloperidol or any component of its formulation.
- Parkinson's disease
- Severe CNS depression or coma

Adult dosages

- CCP: Emergency sedation of severely agitated or delirious patients

- 5-10 mg IM
- 2-5 mg IV incrementally to effect

Pediatric Considerations And Dosing

The safety and efficacy of haloperidol has not been established in children.

Mechanism Of Action

Haloperidol blocks post-synaptic mesolimbic dopaminergic receptors in the brain, depressing the release of hypothalamic and hypophyseal hormones, which is believed to depress the reticular activating system and thus basal metabolism, body temperature, wakefulness, vasomotor tones, and emesis sites.

Pharmacokinetics

Onset of action:

- IM/IV: 30-60 minutes

Adverse Effects

Extrapyramidal reactions, such as Parkinson-like symptoms, akathisia, or dystonia, can occur with haloperidol use. These reactions are reported to occur more frequently when haloperidol is given intravenously. Manage dystonic reactions with diphenhydramine (25-50 mg IV).

Warning And Precautions

Haloperidol is associated with increased mortality in geriatric patients with dementia-related psychosis. Higher doses, as well as intravenous administration, have been associated with an increased risk of QT interval prolongation and the development of torsades de pointes.

