



Medication: Haloperidol	PDN:	Last Updated:	PMD:	PDC:	Page 1 of 2
	6995.02	August 9 2023	Andrew Travers"	Tanya Fraser*	

HALOPERIDOL For palliative care use only

1.0 Classification

Antipsychotic and antiemetic

2.0 Mechanism of Action

 Non-selectively binds to various dopamine and adrenergic receptors in the brain which causes interference with neurotransmission and hormone release affecting wakefulness, vasomotor tone, and emesis.

3.0 Indications

- In the palliative care population for:
 - Delirium
 - Nausea and vomiting secondary to bowel obstruction

4.0 Contraindications

- Known hypersensitivity
- Severe CNS depression
- Patients receiving medications that put them at risk for extrapyramidal reactions such as metoclopramide or antipsychotic medications.

5.0 Precautions

- Use with caution for patients with cardiovascular disease as it may cause orthostatic hypotension.
- Use with caution for patients with known seizure disorder as it may lower the seizure threshold.
- Use with caution for patients with known hepatic or renal impairment.

6.0 Route

Subcut is preferred in the palliative setting.

7.0 Dosage

The dosage listed below is standard dosing and may be amended based on the patient's care plan and MCCP consultation.

Adult

- Nausea and vomiting: 0.5-1.0 mg Subcut.
- Delirium: (Mild) 0.5-1.0 mg Subcut; (Moderate) 2.0-2.5 mg Subcut; (Severe) 2.5-5.0 mg Subcut

Pediatric

 Not recommended for use in patients under the age of 18 unless specifically identified to be used in their written palliative care plan or special patient protocol.

8.0 Supplied

5 mg in a 1 mL ampule

9.0 May Be Given By

ACP/CCP (after consultation with MCCP)

10.0 Adverse Effects

- Prolonged QT associated with torsades des pointes.
- Extrapyramidal symptoms such as dystonia, muscle rigidity, akathisia, etc.
 - If signs of extrapyramidal reaction appear consider administering 25 mg IV, IM or Subcut diphenhydramine (subcut is preferred route in the palliative population).

11.0 Special Notes

- Due to this medication's risks of negative cardiac events, it is used only in the palliative setting.
- Haloperidol may be used as a second line agent in the setting of other causes of nausea and vomiting.
- Pregnancy category C [if the patient will benefit from a Category C drug, it is generally used]

12.0 References

- Palliative Care Clinical Practice Guideline
- Compendium of Pharmaceuticals and Specialties (CPS)

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