

MEDICAL ALERT

CARCINOID CRISIS

I have a **neuroendocrine cancer** and I am at risk of a carcinoid crises (labile blood pressure, arrhythmias, bronchospasm, flushing) if I have invasive medical or surgical problems.

The management of carcinoid crisis is intravenous octreotide. This can be given as an infusion or by intermittent bolus to control symptoms.

I will need perioperative prophylactic treatment of intravenous octreotide for acute surgery. I may need additional intravenous octreotide if I still have symptoms. A lower dose can be given subcutaneously for more minor procedures.

ALL DOSAGES GIVEN ON THE REVERSE OF THIS CARD

For prophylaxis:

Preoperative bolus of 500µgm of octreotide and then infusion of 50-500µgm per hour during surgery and continued post-op for 24-48 hours.

Intermittent boluses (50-500µgm) can also be given as required.

For unexpected carcinoid crisis:

Bolus IV Octreotide 100-500µgm, followed by the infusion above.
(Woltering et al 2016; Seymour et al 2013)

Avoid use of adrenaline and noradrenaline.

This card is issued by:



**NeuroEndocrine
Cancer Australia**

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