

# MEDICAL ALERT

# CARCINOID CRISIS

I have a **neuroendocrine cancer** and I am at risk of a carcinoid crisis (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 100-1000 $\mu$ gm of octreotide and then infusion of 100-1000 $\mu$ gm per hour during surgery and continued post-op for 24-48 hours.

Intermittent boluses (100-1000 $\mu$ gm) can also be given as required.

**Intraoperatively avoid use of morphine, pethidine, codeine, atracurium and mivacurium.**

### For unexpected carcinoid crisis:

Bolus IV Octreotide 100-1000 $\mu$ gm, followed by the infusion above  
(Kaltsas et al 2017)

**Avoid use of adrenaline and noradrenaline.**

*This card is issued by:*



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