Pabrinex (Vitamins B and C) Intravenous for Adults

Who can administer

May be administered by registered competent doctor or nurse/midwife

Important information

- Two formulations available - one for IV one for IM use (IM preparation not routinely stocked in UCH). Please ensure the correct formulation is being used for the required route.
- Facilities for treating anaphylaxis should be available when administering this preparation

Available preparations

Vitamin B and C High potency Concentrate 2 x 5ml ampoules

Pabrinex IV (2 ampoules) 2 x 5ml ampoules

Ampoule No. 1 contains	Ampoule No. 2 contains
Thiamine Hydrochloride Ph. Eur. 250mg	Ascorbic Acid Ph. Eur. 500mg
Riboflavine (as Phosphate Sodium BP) 4mg	Nicotinamide Ph. Eur. 160mg
Pyridoxine Hydrochloride Ph. Eur. 50mg	Anhydrous Glucose Ph. Eur. 1g

Reconstitution

Already in solution

Draw up using a 5 micron filter needle

Infusion fluids

Sodium chloride 0.9% or Glucose 5%

Methods of intravenous administration

Intermittent intravenous infusion (administer using an electronically controlled infusion device)

- Equal volumes of the contents of ampoules no. 1 and 2 should be added to 100mL infusion fluid
- Administer over 30 minutes

- Up to three pairs of ampoules may be added to 100mL bag
- A 50mL infusion may be used if required (eg fluid restriction) but the residual volume in the infusion line must be flushed through at the same rate to avoid significant underdosing

Dose in adults

Prophylaxis of Wernicke's Encephalopathy associated with alcohol-use disorders [ref 1]

- Give one pair of ampoules **once a day for 3 days**
- Then switch to oral thiamine 100 to 300mg daily, continued until patient is no longer at risk

Treatment of Suspected or Established Wernicke's Encephalopathy [ref 1]

- **Alcohol dependance**
    - **Two pairs** of ampoules **three times a day for at least 5 days** - and continue until no further improvement in signs and symptoms, or Wernicke's encephalopathy has been excluded
- **No alcohol dependence**
    - **One pair** of ampoules **three times a day for at least 5 days** - and continue until no further improvement in signs and symptoms, or Wernicke's encephalopathy has been excluded
- Then switch to oral thiamine 100 to 300mg daily, continued until patient is no longer at risk

Refeeding syndrome [ref 1]

- Pabrinex should only be used for patients with intestinal failure at high risk or extremely high risk of refeeding syndrome where the oral or enteral route is unavailable
- Give **one pair once daily for 3 days** (5 days for higher-risk patients)

Storage

- Store below 25^{0}C

References

SPC March 2025

1: HSE recommendations for Pabrinex and thiamine prescribing due to international supply disruption July 2024

Therapeutic classification

Multivitamin preparations