

# Salbutamol

## Classification

Bronchodilator

Sympathomimetic

## Indications

■ PCP: Bronchospasm

■ ACP: Adjunctive management of hyperkalemia

## Contraindications

- Known hypersensitivity to salbutamol
- Hemodynamically significant tachycardia

## Adult dosages

■ PCP: Bronchospasm

- 5 mg nebulized. Repeat doses back to back as necessary.
- **NB: nebulized medication therapy not authorized during Covid.**
- 4 x 100 mcg via metered dose inhaler. Repeat as required.

■ ACP: Adjunctive management of hyperkalemia

- 10-20 mg via nebulizer. May require multiple doses back-to-back to reach total dose.
- **NB: nebulized medication therapy not authorized during Covid.**

## Pediatric Considerations And Dosing

[Follow weight-based dosing](#)

■ PCP: Bronchospasm

- Via nebulizer
  - Age < 1 year: 2.5 mg
  - Age > 1 year: 5 mg
  - **NB: nebulized medication therapy not authorized during Covid**
- Via metered dose inhaler:
  - < 10 kg: not indicated
  - < 20 kg: 5 x 100 mcg per round. May repeat up to 3 times.
  - > 20 kg: 10 x 100 mcg per round. May repeat up to 3 times.

## How Supplied

test

## Mechanism Of Action

Salbutamol is a selective beta-2 adrenergic agonist that produces bronchodilation and some degree of vasodilation. Some beta-1 effects can be seen, particularly at higher doses.

## Pharmacokinetics

Inhaled:

- Onset: 5 minutes
- Peak: 1.5-2 hours
- Half-life: 3.8 hours
- Duration: 3-8 hours

## Adverse Effects

- Restlessness, weakness, vertigo, apprehensiveness
- Nausea and vomiting
- Tachycardia or other dysrhythmias
- Paradoxical worsening of respiratory distress
- Cough
- Pulmonary edema
- Sweating, pallor, flushing
- Tremors

## Overdose

Discontinue administration if signs of toxicity are developing: heart rates > 150/minute in adults (> 200/minute in children), or if severe tremors, or ventricular arrhythmias develop.

