



## Bonus Monographs



### Nalbuphine hydrochloride

(NAL-byou-feen)

#### CLASSIFICATION(S):

Narcotic agonist/antagonist  
**Rx:** Nubain, Nubain

SEE ALSO *NARCOTIC ANALGESICS*.

#### ACTION/KINETICS

Synthetic compound resembling oxymorphone and naloxone. Potent analgesic with both narcotic agonist and antagonist actions. Analgesic potency is approximately equal to that of morphine, while its antagonistic potency is approximately one-fourth that of nalorphine. **Onset:** **IV**, 2–3 min; **SC or IM**, < 15 min. **Peak effect:** 30–60 min. **Duration:** 3–6 hr; **t<sub>1/2</sub>:** 5 hr.

#### USES

Moderate to severe pain. Preoperative analgesia, anesthesia adjunct, obstetric analgesia.

#### CONTRAINDICATIONS

Hypersensitivity to drug. Children under 18 years.

#### SPECIAL CONCERNS

Safe use during pregnancy (except for delivery) and lactation not established. Use with caution in presence of head injuries and asthma, MI (if client is nauseous or vomiting), biliary tract surgery (may induce spasms of sphincter of Oddi), renal insufficiency. Clients dependent on narcotics may experience withdrawal symptoms.

#### ADDITIONAL SIDE EFFECTS

Even though nalbuphine is an agonist-antagonist, it may cause depen-

dence and may precipitate withdrawal symptoms in an individual physically dependent on narcotics. **CNS:** Sedation is common. Crying, feelings of unreality, and other psychologic reactions. **GI:** Cramps, dry mouth, bitter taste, dyspepsia. **Skin:** Itching, burning, urticaria, sweaty, clammy skin. **Other:** Blurred vision, difficulty with speech, urinary frequency.

#### DRUG INTERACTIONS

Concomitant use with CNS depressants, other narcotics, phenothiazines, may result in additive depressant effects.

#### HOW SUPPLIED

*Injection:* 10 mg/mL, 20 mg/mL

#### DOSAGE

##### • SC, IM, IV

*Analgesia.*

**Adults:** 10 mg/70 kg q 3–6 hr as needed (single dose should not exceed 20 mg q 3–6 hr; do not exceed a total daily dose of 160 mg).

#### NURSING CONSIDERATIONS

SEE ALSO *NURSING CONSIDERATIONS FOR NARCOTIC ANALGESICS*.

#### ADMINISTRATION/STORAGE

**IV** May be administered IV, undiluted. Administer each 10 mg or less over a 3- to 5-min period.

#### ASSESSMENT

1. Note any narcotic dependence; may precipitate withdrawal symptoms with narcotic addiction.
2. Document sulfite sensitivity.
3. Determine onset, location, duration, and intensity of pain. Use a pain-rating scale to assess pain.
4. Note any history of head injuries,

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asthma, or renal/hepatic/cardiac dysfunction.

**CLIENT/FAMILY TEACHING**

1. Take only as directed; do not share meds.
2. Physical dependence may result from long term use.

3. Report any symptoms of allergic reaction or withdrawal symptoms.

4. Avoid activities that require mental alertness.

**OUTCOMES/EVALUATE**

Desired level of pain control