Ketamine Parenteral and Oral Dose Recommendations

Pharmacology

 Inhibits glutamate binding to NMDA-R receptor; activity at norepinephrine, serotonin, and muscarinic cholinergic, kappa opioid, and voltage-sensitive calcium channel receptors

Pharmacokinetics

- O Lipophilic; Crosses blood brain barrier
- o Protein binding: 47%
- Onset of action: 1-5 min IV/IM, 15-30 min SC; 30 min
- o Plasma half-life: 1-3 hrs (ketamine); 12 hrs (norketamine
- O Duration of action: 4-12 hrs (oral); 10-15 min IV
- O **Metabolism**: N-demethylation via CYP2B6, CYP 2C8/9, CYP 3A4 substrates to norketamine (primary metabolite); norketamine metabolized via hydroxylation and conjugation
- o **Elimination**: Primarily hydroxylated or conjugated norketamine metabolites in urine; 4% unchanged ketamine or norketamine; <5% elimination in feces
- Drug Interactions
 - o Increased ketamine levels with concurrent use of CYP2B6 or CYP2C8/9 inhibitors
- Adverse effects
 - Central nervous system: Alterations in body image/mood, floating sensations, vivid dreams, hallucinations, delirium, purposeless movement, drowsiness, increased intraocular pressure, increased intracranial pressure, increased muscle tone, memory impairment (long-term use)
 - O Gastrointestinal: Nausea and vomiting, hepatic damage (long-term oral use)
 - o Cardiovascular: HTN, tachyarrhythmias
 - O Misc: lacrimation, salivation, ulcerative cystitis (long term oral use)

Route of Administration	Available Product	How product is stocked	Usual Doses
Oral	Compounded capsules	30mg, 60mg capsules	1mg PO Ketamine = 1mg IV Ketamine • Reported Range: 0.3mg-1.15mg PO Ketamine = 1mg IV Ketamine
			Administer in divided doses Q8h • Reported Range: Q4h to Q12h
			If converting patients from Ketamine infusion to oral, administer first oral dose 4 to 8 hrs after infusion stopped
			 May titrate every 48-72 hrs Typical starting dose in ketamine naïve patient: 10mg-30mg PO Q8h Maximum Reported Oral Dose: 800mg/day



Route of Administration	Available Product	How product is stocked	Usual Doses
Intravenous or Subcutaneous	, , , , , , , , , , , , , , , , , , , ,	Volume: 500mg/250ml in	Bolus: 0.1mg/kg-0.4mg/kg Slow IV push Maintenance Infusion: 0.1 mg/kg/hr – 1mg/kg/hr Once pain stabilized, may titrate maintenance infusion by 0.05- 0.1mg/kg/hr every 24 hrs
			Due to lack of concrete data, recommend conservative initial doses and dose titrations
			Maximum Reported Parenteral Dose: 3600mg/day

Example of an IV to Oral Ketamine Conversion

70kg patient on a ketamine infusion at 0.2mg/kg-hr

70kg (ketamine IV 0.1mg/kg-hr)(24 hrs/day) = 336mg IV ketamine/day

336 mg IV ketamine/day (1 mg PO ketamine/1 mg IV ketamine) = 336 mg PO ketamine/day 336 mg PO

ketamine/day (3 doses/day) = 112mg [Round to available capsule size 60mg] Final oral regimen: Ketamine 120mg PO Q8h

References

- 1. Okon T. Ketamine: an introduction for the pain and palliative medicine physician. Pain Physician. 2007:10:493-500.
- 2. Fitzgibbon EJ, Hall P, Schroder C, Seely J, Viola R. Low dose ketamine as an analgesic adjuvant in difficult pain syndromes: a strategy for conversion from parenteral to oral ketamine. J Pain Symptom Manage. 2002;23(2):165-170.
- 3. Benitez-Rosario MA, Feria M, Salinas-Martin A, et al. A retrospective comparison of the dose ratio between subcutaneous and oral ketamine. J Pain Symptom Manage. 2003;25(5):400-401.
- 4. Broadley KE, Kurowska A, Tookman A. Ketamine injection used orally. Palliat Med. 1996; 10:247-250.
- 5. Blonk MI, Koder BG, Bemt PM, Huygen FJ. Use of oral ketamine in chronic pain management: a review. Eur J Pain. 2010;14(5):466-72.
- 6. Benitez-Rosario MA, Salinas-Martin A, Gonzalez-Guillermo T, Feria M. A strategy for conversion from subcutaneous to oral ketamine in cancer pain patients: effect of a 1:1 ratio. J Pain Symptom Manage. 2011;41(6):1098-1105.
- 7. Quibell R, Prommer EE, Mihalyo M, Twycross R, Wilcock A. Therapeutic reviews: ketamine. J Pain Symptom Manage. 2011;41(3):640-649.

Prepared by: Katherine Juba, PharmD, BCPS Reviewed by: Timothy Quill, MD, 5/12

