

TRANEXAMIC ACID

Additional Names: TXA, Cyklokapron

Classification: Antifibrinolytic Agent

Indications: Major Hemorrhage (trauma)

Contraindications: Known Hypersensitivity
≥ 3 hours from time of injury
Subarachnoid Hemorrhage
Active intravascular clotting

Dosages: **Adult:**
Traumatic Shock
2g IV/IO over 10 min, if available

Side Effects: Hypotension if given rapidly, diarrhea, nausea, vomiting, and blurred vision

Physiological: Effects TXA is a synthetic amino acid that prevents plasminogen from being converted to plasmin. Plasmin is responsible for breaking down already formed clots in the body in a process known as fibrinolysis. When TXA is administered, it will prevent the body from breaking down clots so that the natural clotting processes can work to control non-compressible hemorrhage.

Additional Info: May give IM as a last resort
Administer TXA no later than 3 hours from time of injury
TXA administered within 1 hour of time of injury has shown to significantly reduce the risk of death due to bleeding
If hypotension occurs slow down infusion rate