Lactulose for constipation SESLHDPR/457

POLICY STATEMENT

The Registered Nurse (RN) / Registered Midwife (RM) is authorised to instigate nurse/midwife initiated medication without an authorised prescriber's order under the specific circumstances set out in the **INDICATIONS** section and provided there are no contraindications present.

It is important for nursing and midwifery staff to remain aware that:

- Minor ailments may be symptoms of other more serious diseases or may be adverse reactions to medication already prescribed
- Nurse-initiated medication may interact with the patient's prescribed medication
- The maximum daily recommended dose of the medication must not be exceeded.[1]

The administering nurse/midwife must record the administration on an approved paper or electronic medication chart, clearly indicating that the medicine was nurse initiated.

If the patient continues to require the medication (i.e. more than two doses in 24 hours) then a medical officer (MO) must be consulted and a regular or PRN order obtained.

A change in the patient's condition such as newly occurring or increasing severity of symptoms must be reported to the MO and investigated.

INDICATIONS

Management of treatable constipation (including opioid induced)

CONTRAINDICATIONS

Hypersensitivity to the active substance or to any of the excipients.
Galactosaemia - galactose or lactose restricted diet
Intestinal obstruction.
Clinical dehydration

PRECAUTIONS

Safe to use in pregnancy or breastfeeding

HISTORY / ASSESSMENT

- Assess patient's usual bowel habits (frequency of stools, volume, colour, consistency)
- Patient's current bowel status (last time bowel opened)
- Assess for alterations in bowel patterns
- Refer to medical officer if patient has the following symptoms: blood in stools, weight loss, abdominal pain
- Assess patient for faecal impaction.
- Review patient's current medication for medicines which may cause constipation
- Consider risk of fluid overload

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PROTOCOL / ADMINISTRATION GUIDELINES

Caution: CHECK for allergies and/or contraindications			
Drug	**Dose[4]**	**Route**	**Frequency**
Lactulose	***1 to 6 years* : 5 to 10 mL**	**Oral**	**Once**
	***7 to 12 years* : 15 mL**		
	***Over 12 years* : 15 to 45 mL**		
Give with fluid such as fruit juice, water or milk			

MONITORING - POTENTIAL ADVERSE EFFECTS/INTERACTIONS

Monitor bowel function and complete stool chart
Common adverse effects: flatulence, abdominal discomfort, cramps
Infrequent adverse effects: diarrhoea, electrolyte imbalance (prolonged use), nausea, vomiting.

DOCUMENTATION

A record of the administration must be made on the approved paper or electronic medication chart noting that the medication was nurse initiated.

A further record of the medication administered including indication, dose and effect must be included in the patient's health care record.

PRACTICE POINTS

- Onset of action is 1 to 3 days.
- Ensure adequate fluid intake
- Ensure adequate dietary fibre intake.
- Encourage mobility, where possible.
- Consider review by dietician, if appropriate.

REFERENCES/FURTHER READING

1. PD2013_043 Medication Handling in NSW Public Health Facilities
2. Product Information Dulphalac®. MIMS online. Accessed 20/02/2018.
3. eTG complete. Melbourne: Therapeutic Guidelines Ltd. November 2017. Accessed 20/02/2018.
4. Australian Medicines Handbook. South Australia: Australian Medicines Handbook Pty Ltd, January 2018.

REVISION and APPROVAL HISTORY

Date	Revision Number	Author and Approval
July 2015	DRAFT	Pharmacy Department, Prince of Wales Hospital
September 2015	1	Approved by SESLHD Drug & QUM Committee
May 2018	DRAFT 2	Reviewed by nursing and pharmacy staff. Minor wording updates made. Doses updated to recommended initial doses. References updated.
July 2018	2	Approved by SESLHD Quality Use of Medicines Committee
September 2021	DRAFT 3	Reviewed by nursing and pharmacy staff. Minor wording updates
October 2021	3	Approved by SESLHD Quality Use of Medicines Committee