

UFA MEDICATION REFERENCE – TRANEXAMIC ACID (TXA)

Classification: Anti-fibrinolytic

Intervention Scope of Care: Paramedic

Prehospital Indications:

- Severe, non-compressible and/or uncontrollable hemorrhage
 - < 1hr from onset of injury to administration of medication
 - Signs or symptoms of shock *UFA EMS Protocol – Shock & Fluid Therapy*
 - Age \geq 16 yo
- Severe vaginal bleeding
 - With signs/symptoms of shock
 - Age \geq 16 yo

Contraindications:

- Isolated traumatic brain injury without external uncontrollable hemorrhage
- > 1 hour from injury
- Allergy
- History of venous or arterial thromboembolism (DVT/PE, etc.)

Cautions:

- Hypotension may be seen with rapid infusion
- Hypotension from rapid infusion may be profound, may not respond to IVF boluses
- May rarely contribute to coagulopathies.
- The risks of TXA administration likely outweigh any if administered more than 1 hour after injury, after full activation of endogenous fibrinolysis begins.

Adult Dose:

Paramedic: 2 grams IV/IO slow infusion (max rate 100ml/min)

Pediatric Dose (Age \leq 15yo):

Contact medical control

Mechanism of Action:

- A lysine analog that occupies binding sites on the plasminogen molecule, competitively inhibiting plasminogen activation. This causes a delay in natural physiologic breakdown of platelet aggregation.
- Anti-fibrinolytic that inhibits both Plasminogen activation and Plasmin activity thus preventing clot breakdown rather than promoting new clot formation.



Pharmacokinetics:

Onset: Variable

Peak Effect: Within minutes

Duration: Variable

Adverse Reactions:

- Seizure
- Diarrhea
- Color vision change/vision loss
- Renal Impairment
- Myalgia
- Headache
- Abdominal pain
- Diarrhea

