

References;

Mehta K (2005) Nurse Prescribers' Formulary 2005-2007

BMJ Publishing Group Ltd. London

GOSH (2004) Buccal Midazolam

Factsheet. www.ich.ulc.ac.uk/factsheets

(accessed 14 November 2005)

Dekyem P (2005) Bedford Hospital NHS Trust Clinical Guidelines for treatment of prolonged seizures in children with Buccal Midazolam.

Bedford Hospital

Support Groups and further information about living with epilepsy;

British Epilepsy Association

www.epilepsy.org.uk

Helpline: 0808 800 5050

Contact a family

www.cafamily.or.uk

Tel: 020 7608 8700

Helpline: 0808 808 3555

National Society for Epilepsy

www.epilepsynse.org.uk

Tel: 01494 601300

Helpline: 01494 601400

Acknowledgement of thanks in the development of this leaflet:

EPEN <http://www.networks.nhs.uk/networks/page/1151>

Bedfordshire PCT

Special Products Lt.d.

Kate Donovan



Eastern Paediatric Epilepsy Network

www.networks.nhs.uk/epenetwork

Buccal Midazolam

(a parent / carers guide to administration)

What is Midazolam?

- Midazolam is a drug known as a benzodiazepine. It has been prescribed for the child/young person to reduce the length of an epileptic seizure and to try and prevent status epilepticus (see below). Outside hospital, the most effective and socially acceptable way of giving this drug to treat a seizure is buccally (between the lower gum and cheek).

Midazolam is available as *Epistatus*®.

- Remember to talk to the child/young person about this medication in a way they understand.
- The doctor or nurse will arrange for you to be given a demonstration and opportunity to practise how to give buccal midazolam when it is prescribed.

What is Status Epilepticus?

- Status epilepticus is a condition in which a seizure (convulsion or fit), or a series of seizures, lasts for 30 minutes or more, without complete recovery of consciousness in between.

Important information you should know

- Keep medicines in a safe place where children cannot reach them.
- Keep midazolam at room temperature, away from bright light or direct sunlight and away from heat.
- Do not store midazolam in a fridge.
- You may not be using midazolam regularly, so please check the expiry date periodically, and that the liquid has not gone cloudy.

A repeat prescription can be requested from the child's/young person's GP.

- If the doctor decides your child should stop taking midazolam, the bottle you have has expired or the liquid turned cloudy return any remaining bottles to your chemist. Do not flush them down the toilet or throw them away.
- Replace the cap immediately after use to prevent evaporation.

The child/young person may also have been prescribed rectal diazepam for epileptic seizures in the past. It is important to remember that either buccal midazolam or rectal diazepam should be given, not both at the same time

Please make a note of the contact details for people you may need to discuss any queries or concerns about epilepsy:

- Paediatrician
- Epilepsy Nurse Specialist
- Health visitor
- School Nurse/ Outreach Nurse
- Special Needs Nurse
- GP.

After giving Buccal Midazolam remember

- to continue to monitor the child/young person to make sure they are recovering and breathing well

Note: you can expect the seizure to stop within 5 minutes. If this doesn't happen, call 999 for an ambulance/paramedic and refer to the individual care plan

- to make a record of the date, time and dose of medication given, and also what you observed during the seizure. This will help the doctor to monitor how the child's/young person's epilepsy is progressing
- the child/young person is likely to:
 - feel sleepy, confused, disorientated and anxious
 - experience short term memory loss, and they may not remember having an epileptic seizure. They should be allowed to rest somewhere comfortable and remember to talk to them reassuringly about what has happened, where they are and that you are keeping them safe.
- an effect on breathing is very unlikely to occur if midazolam is used in the dose prescribed. If breathing difficulties do occur, seek medical assistance immediately
- to dispose of the used syringe and gloves safely
- to inform parents of any seizure and actions that have been taken.
- Let all relevant individuals and agencies know when a dose of midazolam has been given for the first time

When is Midazolam given?

Usually when a seizure has lasted for 5 minutes, or according to the child's/young person's care plan
Important checks to make before you give midazolam.

- 1) Is the child/young person having a seizure?
- 2) Is this the type of seizure that needs buccal midazolam?
- 3) Ensure they are safe while you call for help and get their midazolam pack to them, and that you are safe while you help them.

Do not move anyone having a seizure unless they are in danger.

- 4) Check you have the child's/young person's agreed individual seizure care plan. It will state the:
 - right medication
 - right dose
 - circumstances and timing for giving midazolam.
- 5) Check the medication is not out of date or cloudy.
- 6) It is good practice to wear gloves, (preferably latex free).

Call 999 for further medical assistance if:

- you are unable to give midazolam
- the seizure lasts for 5 minutes after you have given midazolam
- the care plan advises calling an ambulance
- you are worried
- it is first time ever that midazolam is being given

Keep the child/young person safe while you are waiting for paramedics to arrive.

How to administer Buccal Midazolam



Open bottle, check plunger of syringe is pressed to the bottom and firmly insert syringe into bung on top of the bottle.

Holding the bottle, tip it upside down and slowly pull back on syringe plunger (to release the air) and return. Then pull back on the syringe plunger until you have withdrawn the amount prescribed. Put lid back on bottle immediately to prevent medicine evaporating.



If the person has no head support on a chair, support the head by standing behind them, holding the chin. Be careful not to press on the throat

If lying on the floor or if a chair has a head support in place hold chin to keep head steady.



Open mouth gently by holding chin, apply downward pressure on the lower lip and wipe away any excess saliva.
(No need to part the teeth)

Place nozzle of the syringe between the lower gum and cheek on one side of the mouth (the buccal cavity). Slowly give dose into the mouth, remove syringe, close lips together and rub cheek on the outside. Can be given on either side or both, divided approximately into half each side.



Do not give the midazolam too quickly, as this may cause the person to choke or swallow it. If a small amount is swallowed it is not a problem.

Place person in the recovery position, if appropriate

