Haloperidol (Haldol)

Haloperidol is a butyrophenone tranquilizer. It is used to treat combative/violent behavior and is given intramuscularly or intravenously. It has anti-cholingeric effects like other phenothiazines, causing dry mouth, dilated pupils, blurred vision, elevated heart rate, elevated temperature, urinary retention and constipation. It can cause QT interval prolongation and Torsades similar to droperidol; but it is not likely. It can cause orthostatic hypotension; but that is also rare.

Indications and Administration

1. To tranquilize the combative violent patient.
   a. **Adult** 5-10 mg IM or IV.
   b. **Elderly** 1-2 mg IM or IV.
   c. **Child** > 4 yrs old use is approved but dose range not established. Contact medical control for dose.

Notes

1. The lower the dose the less likely an adverse reaction. After administration when the patient has become cooperative apply a cardiac monitor.
2. Extrapyramidal or dystonic reactions are dose related but usually won't occur in the prehospital setting. They are more likely to occur during a transfer to another facility. Similarly, a restless reaction may occur. Treatment for either one is with diphenhydramine (Benadryl) 25-50 mg IV or lorazepam (Ativan) 1 mg IV.
3. Haldol can theoretically decrease the seizure threshold in pts with a seizure disorder or pts who are at risk for seizures but this is not proven.
4. Haldol can rarely cause Neuroleptic Malignant Syndrome. In patients with heat stroke or agitated delirium, carefully weigh risks and benefits prior to administration.
5. Haldol is not to be used in pts who have Parkinson's disease.
6. Expect greater anti-cholingeric symptoms when Haldol is used in patients who have taken certain substances of abuse that are also anti-cholinergic.
7. Consider using sedatives such as diazepam or lorazepam as a means of settling down a sick patient with an infectious disease such as encephalitis or pneumonia instead of haldol, which can be a metabolically toxic drug during severe illness. Consult medical control if questions arise with a particular patient.