

Medication during embolisation with drug eluting microspheres (DC-Beads Beads)

Pre Medication evening before

100 mg Prednisolon p.o.

Hydration. - Deliver fluids orally.

Medication in the morning; day of procedure

1 g Novalgin i.v. (No Paracetamol)

75 mg Diclofenac

4 mg Ondansetron alternatively 1 mg Kevatril

3 g Unacid i.v. short infusion

100 mg Prednisolone i.v.

Provide 2 vials of Dipidolor during rad control (DSA)

Hydration. – A further 10mg in 100ml Sodium Chloride 0.9% may be given intravenously if needed. (Otherwise deliver fluids orally).

Medication during TACE

15 mg Dipidolor i.v. short infusion (Piritramid)

2 ml (20mg) Xylocain/Lidocain i.a. before Embolization

500 ml Ringer-Infusion (ev. 5%ige HAES)

In case of vegetative reaction:

Atropin i.v. Bolus e.g. additional Buscopan and MCP i.v.

Medication after TACE

Opioids if necessary

Optional during huge pain condition (Reduction day 3)

4 mg Palladon (1-0-1)

1 g Novalgin p.o. (1-1-1-1)

75 mg Amitriptylin

150 mg Pregabalin (Lyrica)

Ondansetron alternatively Kevatril if indicated

In case of persistent vomitus

MCP/Buscopan / 100 mg Prednisolin i.v.

Hydration. - 2 Litres of Sodium Chloride 0.9% intravenously over 16 hours if nauseous.
(Otherwise deliver fluids orally).

Additional

→ Daily blood control (laboratory). approx. 4-5 days

(Transaminase, Bili, Krea, Quick, Leukos, Hb, Htkr Elektrolyte)

→ CT-Control (native, venous, art.) 1. Tag post interventional

→ Ultrasound 2.day

→ Exiting hospital 2 days post embolization (if no further problems)

→ MRI-post control after week 4

– **post interventional control after 4-6 weeks**