▼ Hepatic Encephalopathy ————————————————————————————————————
In making a diagnosis of hepatic encephalopathy, other causes of decreased level of consciousness must be considered. All patients with presumed hepatic encephalopathy need work up/treatment for potential precipitating factors (including but not limited to an infection screen with diagnostic paracentesis if they have ascites, medication assessment, screen for metabolic abnormalities, and assessment for evidence of Gl bleeding).
☐ Monitor Bowel Routine - Stool charting
☐ Microbiology
Consider other investigations as clinically warranted.
☐ Blood Culture Panel - Adult x 2
Urine Culture, Routine
☐ Urine General Toxicology Panel ☐ GR Chest 2 Projections Routine, Once
Medications
☐ Lactulose OR PEG 3350
□ lactulose
○ lactulose PO
lactulose 667 mg/mL liquid oral 30 mL
30 mL, oral, every 2 hours,
until bowel movement or clinical improvement
Followed By lactulose 667 mg/mL liquid oral 15-30 mL
15-30 mL, oral, 3 times per day,
Titrate dose to achieve 2 to 3 soft bowel movements per day
○ lactulose NG
lactulose 667 mg/mL liquid oral 30 mL
30 mL, nasogastric tube, every 2 hours, until bowel movement or clinical improvement
·
Followed By lactulose 667 mg/mL liquid oral 15-30 mL
15-30 mL, nasogastric tube, 3 times per day,
Titrate dose to achieve 2 to 3 soft bowel movements per day.
Use caution with NG and recently banded varices.
○ lactulose 667 mg/mL oral liquid for rectal use 300 mL
300 mL, rectal, every 4 hours,
300 mLs in 700 mLs of water rectally every 4 hours until clinical improvement. Retain for 30 to 60 minutes (use if unable to take oral therapy)
Retention enema; retain for 30-60 minutes.
PEG 3350 PO/NG (consider with ileus, intolerance to lactulose)
PEG 3350 PO
polyethylene glycol 3350 powder 17 g
17 g, oral, every 2 hours,
until bowel movement or clinical improvement
Dissolve powder by stirring into 120-250 mL of beverage prior to consumption.
Followed By polyethylene glycol 3350 powder 17 g
17 g, oral, daily,
Titrate to achieve 2 to 3 soft bowel movements per day.
Dissolve powder by stirring into 120-250 mL of beverage prior to consumption.

## O PEG 3350 NG

polyethylene glycol 3350 powder 17 g 17 g, nasogastric tube, every 2 hours, until bowel movement or clinical improvement Dissolve powder by stirring into 120-250 mL of beverage prior to consumption.

## Followed By

polyethylene glycol 3350 powder 17 g 17 g, nasogastric tube, daily, Titrate to achieve 2 to 3 soft bowel movements per day. Use caution with NG and recently banded varices. Dissolve powder by stirring into 120-250 mL of beverage prior to consumption.

## ☐ rifAXIMin tablet (i)

550 mg, oral, 2 times per day, if intolerance to lactulose or patient has experienced greater than or equal to 2 overt hepatic encephalopathy episodes.

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