




ATC codes: **M03AC04**

Indication	Skeletal muscle relaxants [neuromuscular blocking agents] ICD11 code: <b>XM1638330014</b>
INN	Atracurium besilate
Medicine type	Chemical agent
List type	Core
Formulations	Parenteral > General injections > IV: 10 mg per mL (besylate)
EML status history	First added in 2011 ( <b>TRS 965</b> )
Sex	All
Age	Adolescents and adults
Therapeutic equivalence	Medicines within the same pharmacological class can be used
Patent information	Patents have expired in most jurisdictions Read more <b>about patents</b> . 
Wikipedia	<b>Atracurium</b> 
DrugBank	<b>Atracurium (Atracurium besylate)</b> 

### Summary of evidence and Expert Committee recommendations

Atracurium, with a square box, was added to the core list of the EML following a review of Section 20 by the Expert Committee in 2011. The current EML included suxamethonium, alcuronium (2), and vecuronium (2). The review proposed to replace alcuronium by atracurium (2). Alcuronium has a slow onset and long duration of action, with more adverse effects than other non-depolarizing agents (1). It is no longer registered by stringent regulatory authorities (United States, United Kingdom, France). Atracurium has fewer adverse effects, although it can cause histamine release. Rocuronium and vecuronium have longer onset of action but decreased risk of tachycardia. Pancuronium has an even longer onset and duration of action. The Committee noted that the information in the review showed that, within the class, atracurium is cheaper than others except pancuronium (Table 7 in the application) and therefore recommended the replacement of alcuronium with atracurium (2), due to its comparative effectiveness and safety profile, current availability, and cost. The Committee recommended that this section (Section 20) be reviewed before the next Expert Committee meeting, to consider which longer-acting agents were needed, and which were specifically useful in children. References: 1. Hunter JM. New neuromuscular blocking drugs. *New England Journal of Medicine*, 1995, 332:1691–1699.

