



藥學資料庫

碩睿資訊有限公司

Shou Ray Information Service Co., Ltd

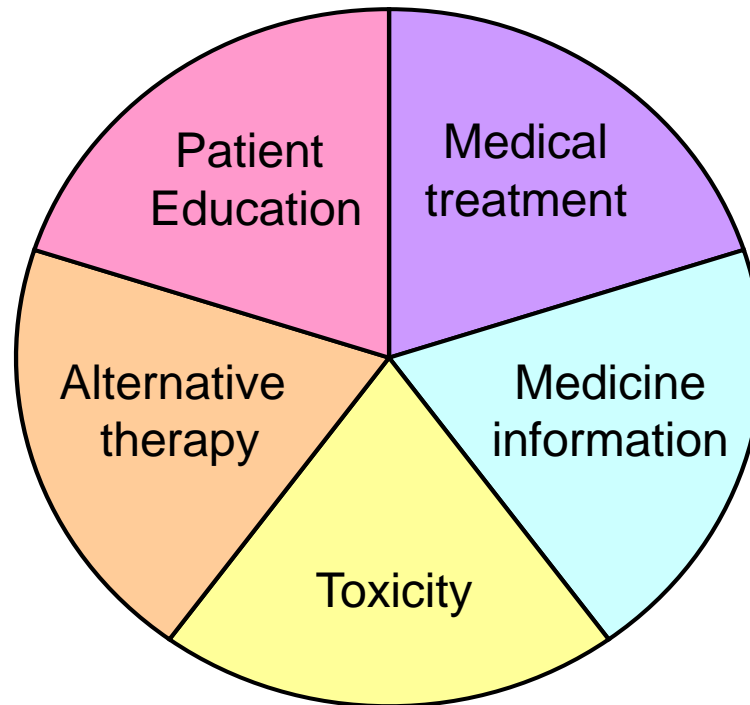
2017年

Outline

- ◆ What Is **Micromedex 2.0**?
- ◆ Databases
- ◆ Navigation & Searching in **Micromedex 2.0**
- ◆ Case study

What Is Micromedex ?

◆ Micromedex[®] 2.0 Healthcare Series



Why they trust Micromedex ?

◆ Authority

- ◆ DrugDex, Poisindex, DiseaseDex Emergency Medicine was adapted by U.S. Department of State as officially medical encyclopedia

◆ Quality

- ◆ Strict editorial process

◆ Reliability

- ◆ Provide service for schools, hospitals, and pharmaceutical companies over 30 years

◆ Consistency

- ◆ Consistency formats and standards

◆ Full-text databases

- ◆ Fully referenced, Peer reviewed, Written by clinicians

Databases

Drug Information	Disease Information
<u>DRUGDEX® System</u> <u>DRUG-REAX® System</u> <u>MARTINDALE</u> <u>Index Nominum</u> <u>Physicians' Desk</u> <u>Reference®(PDR®)</u> <u>P & T QUIK® Reports</u> <u>IV INDEX® System</u> <u>MSDS</u> <u>IDENTIDEX® System</u> <u>Red Book® Online</u> <u>KINETIDEX® System</u>	<u>DISEASEDEX™ General Medicine</u> <u>DISEASEDEX™ Emergency Med.</u> <u>Lab adviser™</u>
	Patient Education
	<u>AltCareDex® Alternative Medicine</u> <u>Education</u> <u>CareNotes™ System</u>
	Toxicology Information
	<u>POISINDEX® System</u> <u>TOMES® System</u> <u>REPRORISK® System</u>
Alternative Medicine	Free Resources
<u>AltMedDex® System</u> <u>AltMedDex® Protocols</u> <u>Herbal Medicines</u>	<u>Calculators</u> <u>mobileMICROMEDEX™ System</u>

主頁

藥物
相互作用

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NeoFax® / Pediatrics

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3.小幫手區

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疾病

毒理學

搜尋藥物、疾病、毒理學及其他資訊

1.檢索區

搜尋 Micromedex



4 最新消息

- Type 2 Diabetes Combination Approved
- Expanded Approval of Vyvanse(R) for...
- Combination Treatment Approved for HIV-1
- New HIV Combination Drug Approved
- New Hemodialysis Iron Replacement

Read Top News



5 支援和訓練

- Citing Micromedex
- Clinical Consulting & Services
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6 資源

- 黑框警告
- Comparative Tables
- Do Not Confuse Drug List
- Drug Classes
- Drug Consults
- REMS



Download Mobile Apps

資料庫登入方式

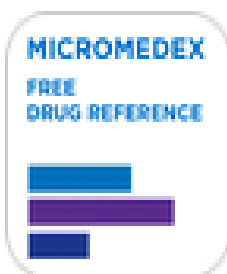
- 限IP範圍內
 - 有同時上線人數限制
- 利用行動載具下載APP版本
 - 離線版，需定期更新

APP下載

[My Subscription](#) | [Gateway](#) | [Training Center](#) | [Help](#) | [Download Center](#) | [Logout](#)

[Other Tools](#) ▼

Drug Reference



Drug Interactions



IV Compatibility



可離線使用，不受制於使用人數

APP使用方式

下載APP

下載中心
→ 對應密碼

依個別APP
輸入密碼

Drugs

war

Drug Name	Drug Class
Coumadin (Warfarin Sodium)	>
Jantoven (Warfarin Sodium)	>
Warfarin Sodium	>

Micromedex Apps on Apple® Devices

Micromedex Apps on Apple®, Android® and Windows 8® Devices

Free Micromedex® **Drug Reference** for Internet Subscribers



- The **Free Micromedex Drug Reference for Internet Subscribers** app for Apple, Android, and Windows 8 devices available for FREE for Micromedex customers.
- You can access these apps via the iTunes® App Store (Apple devices), Google Play® (Android devices) or the Windows Store® (Windows 8 devices).
- Android users only: the app is called **Free Micromedex Drug Reference** in the Google Play store.
- You can activate the app by following the simple instructions below.

Simple instructions for installation:

- Step 1** Visit the iTunes App Store (Apple devices), Google Play Store (Android devices) or the Windows Store (Windows 8 devices) and search for "Micromedex."
- Step 2** From all the Micromedex app results, select **Free Micromedex Drug Reference for Internet Subscribers** (Apple devices and Windows 8 devices) or **Free Micromedex Drug Reference** (Android devices). You may be prompted to enter your Apple, Google or Windows ID.
- Step 3** The app should download directly to your device. (If you visited the iTunes App Store on your PC rather than your device, you may have to sync your device to iTunes on your PC, in order to load the app onto your device.)
- Step 4** Open the app on your device. Enter the password **123456** to begin using **Free Micromedex Drug Reference for Internet Subscribers**. *The password is case-sensitive. Please enter it exactly as it appears here.*

APP密碼到期

- 請重新進入Apple  或Android  搜尋「Micromedex Drug Reference」，然後點選「更新」按鈕。
- 完成更新後，重新開啟APP，輸入密碼。
 - (新密碼的取得須在IP範圍內登入Micromedex 資料庫，進入下載中心 頁面或  即可找到。)

小提醒

- 過一陣子您再開啟這支APP時，它可能會提示您密碼已經到期，要求您再輸入新密碼。
- 此時，請您重新進入iTunes App Store (Apple), 或 Google Play Store (Android)，搜尋「Micromedex Drug Reference」，然後點選「更新」按鈕。
- 完成更新後，重新開啟這支APP，輸入密碼。(新密碼的取得一樣必須在IP範圍內登入Micromedex資料庫，進入移動頁面即可找到。)



換你試試看

- 請下載Micromedex的APP到手機裡，並找到密碼啟用它吧！

我的訂閱

已經訂購

尚未訂購

MICROMEDEX
用於 Shou Ray Information Service Co Ltd. (客戶號: 418410001)

Your Subscribed Products	Non-subscribed Products
MICROMEDEX <ul style="list-style-type: none"> AAPCC Codes in POISINDEX® Alternative Medicine Detailed Drug Information for the Consumer DISEASEDEX™ Emergency Medicine DISEASEDEX™ General Medicine DRUGDEX® System Imprint Codes in Identidex® Index Nominum Interaction Checking Italian Drug Database IV Compatibility Lab Advisor™ MARTINDALE MSDS from USP	MICROMEDEX <ul style="list-style-type: none"> PharmacyXpert

列印 關閉

Micromedex 2.0網址：

<http://certify.micromedexsolutions.com/micromedex2/librarian>

主頁

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鑒定

藥物
比較

CareNotes®

NeoFax® / Pediatrics

其他工具 ▼

Micromedex® Solutions Web Applications Access

Product update and notifications: There are no current notifications.

Clinical Knowledge Solutions:

Micromedex® Medication, Disease and Toxicology Management

- Evidence based clinical resources.
- Unbiased, referenced Clinical Decision Support (CDS) for medication, toxicology, disease, acute care and alternative medicine.
- Safely and reliably manage drug therapy for pediatric and neonatal patients with Pediatric and NeoFax® evidence-based drug information.
- RedBook® provides daily access to drug pricing and descriptive information for more than 200,000 active and deactivated FDA-approved prescriptions.
- Helps you make informed clinical diagnosis and treatment decisions.

Micromedex Formulary Management

- Easy-to-use online tool to effectively manage and update a hospital's formulary and communicate the most current formulary information facility-wide.

Find information about additional Micromedex Clinical Knowledge modules at www.micromedex.com/clinicknowledge

Patient Connect Solutions:

Micromedex CareNotes®

- Provides patients with complete, easy-to-understand patient education handouts.
- Includes patient discharge instructions and documents that provide patient education for conditions and diagnoses, labs, procedures.
- Documents are written at a 5th-7th grade reading level, and are available in up to 15 languages.

For more information about CareNotes Patient Education and Discharge instructions visit www.micromedex.com/carenotes

Your applications:

Micromedex® 2.0

CareNotes® System

Log in as someone else.

也可從此登入

使用說明(Help)

每次用完之後
請點選登出按鈕



我的訂閱 | 開道 | 說明 | 下載中心 | 登出

TRUVEN HEALTH ANALYTICS
MICROMEDEX® SOLUTIONS

返回主頁 Micromedex Solutions Help - Google Chrome

主頁

www.micromedexsolutions.com/micromedex2/4.78.0/WebHelp/MICROMEDEX_2.htm#Home_Page/Home_P

CONTENTS INDEX SEARCH GLOSSARY

- Micromedex Solutions Overview
- Home Page
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- Searching
- Search Results
- Tools
- Access Micromedex on Your Mobile Device
- Other Applications
- Browser Settings

Begin entering a drug name, and a drop-down list of suggestions displays. Use the **arrow up/down** keys to make a selection. Then press the **Enter** key or click the search button.

dabi

Dabigatran
Dabigatran Etexilate
Dosing **Dabigatran Etexilate**
Adverse Effects **Dabigatran Etexilate**
Indications **Dabigatran Etexilate**
Interactions **Dabigatran Etexilate**

dabigatran etexilate mesilate

For detailed instructions on creating searches in Micromedex Solutions [click here](#).

From beneath the *Search Micromedex* search box on the Home Page you can access: the **Latest News** from Micromedex Solutions and across the industry, **Support & Training** and other



碩睿資訊有限公司
Shou Ray Information Service Co., Ltd.

最新消息



最新消息

- 12-Hour Codeine-Based Cough...
- Once-Daily Inhaler Now for Asthma
- First Spray-Dried Fibrin Sealant...
- New Hemodialysis Iron Replacement

Read Top News



支援和訓練

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- Clinical Consulting & Services
- Integrated Content Options for MU & More
- Tips & Tricks
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- User Guide

Support Request



資源

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- Do Not Confuse Drug List
- Drug Classes
- Drug Consults
- REMS



Download Mobile Apps



Latest News

關閉 X

▶ [Once-Daily COPD Inhaler](#)

▶ [Dosing Errors with Zerbaxa\(TM\) Antibiotic](#)

▼ [Now Live. New Enhancements to Accelerate Your Micromedex Experience](#)

Enhancements to improve your day-to-day user experience are here!

- Improved navigation and enriched interface
- Direct access to 'Quick' and 'In-Depth' information for faster answers
- Reference complementary content sets from within the search results
- Search within a results page and monograph with pinpoint specificity

Learn all the new features! Download an [enhancement summary](#) today.

And check out our quick, self-paced courses available to learn tips and tricks for finding evidence-based answers to your drug, disease and toxicology questions - fast! Visit micromedex.com/training for a complete list of courses - designed with you in mind!

Last modified: 05/20/2015 16:40:08

▶ [Attending MUSE 2015? Start Here](#)

▶ [Get the Facts: Hospital Performance](#)

Citing Micromedex



最新消息

- 12-Hour Codeine-Based Cough...
- Once-Daily Inhaler Now for Asthma
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- REMS

An entire System or Database:

[↑ Top of of page](#)

AltCareDex® System:

AltCareDex® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: month/day/year).

AltMedDex® System:

AltMedDex® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: month/day/year).

AltMed-REAX™ for the Patient:

AltMed-REAX™ for the Patient (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: month/day/year).

CareNotes® System:

CareNotes® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: month/day/year).

Citing Micromedex

HOW TO REFERENCE THE Truven Health Analytics SYSTEMS

An individual document:

DRUGDEX® System:

(Title). In: DRUGDEX® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

AltCareDex® System:

(Title). In: AltCareDex® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

AltMedDex® System:

(Title). In: AltMedDex® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

AltMed-REAX™ for the Patient:

(Title). In: AltMed-REAX™ for the Patient (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

DISEASEDEX™ Emergency Medicine:

DISEASEDEX™ Emergency Medicine. In: DISEASEDEX - Emergency Medicine (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

DISEASEDEX™ General Medicine:

(Title). In: DISEASEDEX - General Medicine (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

Dosing & Therapeutic Tools Database:

Anon: Cephalosporin Generations. In: Dosing & Therapeutic Tools Database (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).

DRUGDEX® System:

(Title). In: DRUGDEX® System (electronic version). Truven Health Analytics, Greenwood Village, Colorado, USA. Available at: <http://www.micromedexsolutions.com/> (cited: *month/day/year*).



支援和訓練

- Citing Micromedex
- Clinical Consulting & Services
- Integrated Content Options for
- **Tips & Tricks**
- Training & Tutorials
- User Guide

Micromedex Tips & Tricks



To help you get the most out of your Micromedex® Clinical Knowledge subscription, use this as a quick reminder of some of the helpful and relevant information available at your fingertips.

Simply type the term or phrase shown in the left column below into the search field, then click the SEARCH button.



Search Term/Phrase	Description
2015	Returns the Drug Consults, New Drug Approvals - 2015 Micromedex News and Childhood Immunization Schedule - United States 2015 . The immunization schedule is based on recommendations from the U.S. Centers for Disease Control and Prevention.*
Abbreviations	Returns the Drug Consult, Abbreviations , which provides definitions for abbreviations used commonly throughout Micromedex content.*
BBW (or Black Box) ✕	Returns a list of drugs that carry a black-box warning. Selecting a drug link opens the black-box warning content.
Causes of [Disease/Condition]	Returns links to the Disease Summary Dashboards, and to the Medical History or Etiology/ Pathophysiology sections in disease reviews.* Example: <i>causes of anemia</i>
Chemotherapy	Returns various Drug Consults, such as the Chemotherapy Acronyms and Dosing , Chemotherapy Dosing in Obese Adults , Chemotherapy and Radiotherapy Protectants - ASCO Clinical Practice Guidelines , and Chemotherapy and Radiotherapy Treatment Guidelines for Nausea and Vomiting .*
Clinical Approach To	Click on the Toxicology Results link to see toxin-induced disease states (hyperthermia, hypotension, metabolic acidosis, or tachyarrhythmia).*
Comparative Table ✕	Returns lists of comparative drug class tables.
[Condition Name]	Typing a condition opens search suggestions that land in the disease dashboard. Or you can execute the <i>drugs that cause</i> and <i>drugs that treat</i> searches (see below for details).
Confused Drug Names ✕	Presents a list of commonly confused drug names, including look-alike and sound-alike name pairs.
Consults (or Drug Consults) ✕	Displays an alphabetical list of Drug Consults, which are evidence-based documents covering a broad range of topics, including comparative drug tables, clinical guideline summaries, drug class-related adverse effects discussions, chemotherapy regimen acronyms, and other therapeutic overviews spanning multiple drugs or classes.



Chemotherapy and Radiotherapy Treatment Guidelines

Chemotherapy and Radiotherapy Treatment guideline



全部結果

篩選依據

全部 (1087)

藥物 (516)

疾病 (392)

毒理學 (135)

替代藥物 (35)

生殖風險 (9)

CHEMOTHERAPY AND RADIOTHERAPY TREATMENT GUIDELINES FOR NAUSEA AND VOMITING

Drug: Evidence-based drug report (*Drug Consults*)**CHEMOTHERAPY AND RADIOTHERAPY TREATMENT** GUIDELINES FOR NAUSEA AND VOMITING PATIENT DATA/BACKGROUND PATIENT DATA...

HEART FAILURE DRUG MANAGEMENT - ACCF/AHA GUIDELINE

Drug: Evidence-based drug report (*Drug Consults*)...was slowed or stopped by **treatment**. The first 2 stages (A and B) identify patients who...

VENOUS THROMBOEMBOLISM IN PATIENTS WITH CANCER: DRUG THERAPY GUIDELINE

Drug: Evidence-based drug report (*Drug Consults*)...first 3 to 6 months) **Treatment** -related **Chemotherapy** Antiangiogenic agents (eg, thalidomide, lenalidomide) Hormonal therapy Erythropoiesis...

CHEMOTHERAPY AND RADIOTHERAPY PROTECTANTS - ASCO CLINICAL PRACTICE GUIDELINES

Drug: Evidence-based drug report (*Drug Consults*)...the adjuvant setting In the **treatment** of pediatric malignancies In patients with cancer, other than breast...

«

1

2


3

4

5

»

CHEMOTHERAPY AND RADIOTHERAPY TREATMENT GUIDELINES FOR NAUSEA AND VOM...

藥物諮詢 

 頁首

PATIENT DATA/BACKGROUND

In 2011, the American Society of Clinical Oncology (ASCO) updated its 2006 evidence-based clinical practice guidelines for the use of antiemetics in the prevention and treatment of nausea and vomiting due to chemotherapy or radiotherapy. This report summarizes the guidelines presented by ASCO, in addition to addressing pediatric dosing [1], in the following outline:

I.	EMETOGENIC POTENTIAL OF CHEMOTHERAPY AGENTS
II.	PREVENTION OF CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING
III.	TREATMENT OF BREAKTHROUGH CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING
IV.	PEDIATRIC ANTIEMETIC RECOMMENDATIONS FOR CHEMOTHERAPY-INDUCED NAUSEA AND VOMITING
V.	ANTICIPATORY NAUSEA AND VOMITING
VI.	EMETOGENIC POTENTIAL OF RADIOTHERAPY
VII.	PREVENTION AND TREATMENT OF RADIOTHERAPY-INDUCED NAUSEA AND VOMITING

Comparative Tables

- Dosage
- Class

▶ BENZODIAZEPINES (SELECTED)

▶ CORTICOSTEROIDS (SELECTED) PROPERTIES AND POTENCIES

▶ NSAID (NONSTEROIDAL ANTIINFLAMMATORY AGENTS (SELECTED))

針對各廠牌的藥品，列出各種適應症及有效劑量範圍

Oral NSAIDs			
Generic Name	Brand Name (US)	Indications	Effective Dosage Range
Diclofenac	Cataflam (diclofenac potassium immediate-release tablets)	Pain	50 mg 3 times daily
		Dysmenorrhea	50 mg 3 times daily
		Osteoarthritis	50 mg 2 to 3 times daily
		Rheumatoid Arthritis	50 mg 3 to 4 times daily
	Voltaren (diclofenac sodium enteric-coated tablets)	Ankylosing Spondylitis	25 mg 4 times daily, with an extra 25 mg at bedtime if needed
		Osteoarthritis, Rheumatoid Arthritis	50 mg 2 to 3 times daily, or 75 mg twice daily
	Voltaren XR (diclofenac sodium extended-release tablets)	Osteoarthritis	100 mg every day
		Rheumatoid Arthritis	75 to 100 mg once or twice daily

Comparative Tables

Dosage

Class

▶ ACE INHIBITORS AND ANGIOTENSIN RECEPTOR BLOCKERS (SELECTED)

▶ ANTIDIABETIC AGENTS (SELECTED)

▶ BETA BLOCKERS

針對各廠牌藥品的降血糖藥，列出常用劑量範圍、最大劑量、低血糖風險、重量變化、胃腸症狀

Generic Drug Name And Brand Name	Usual Dosage Range*	Maximum Daily Dose	Drug Class	Hypoglycemia Risk**	Weight Change**	GI Symptoms**
Acarbose (Precose(R))	25 to 100 mg ORALLY 3 times daily with meals	60 kg or less: 150 mg; Greater than 60 kg: 300 mg	AGI	not significant	not significant	diarrhea, flatulence
Alogliptin (Nesina(R))	25 mg ORALLY once daily	---	DPP-4 inhibitor	not significant	not significant	not significant
Alogliptin Benzoate/Metformin (Kazano)	alogliptin 12.5 mg/metformin 500 mg to alogliptin 12.5 mg/metformin 1000 mg ORALLY twice daily with meals	alogliptin 25 mg/metformin 2000 mg	DPP-4 inhibitor /Biguanide	***	***	***
Alogliptin/Pioglitazone(Oseni)	alogliptin 25 mg/pioglitazone 15 mg to alogliptin 25 mg/pioglitazone 45 mg ORALLY once daily	alogliptin 25 mg/pioglitazone 45 mg	DPP-4 inhibitor/ TZD	***	***	***



主頁	藥物 相互作用	IV 相容性	藥物 鑒定	藥物 比較	CareNotes®	NeoFax® / Pediatrics	其他工具 ▼
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切勿混淆

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顯示 74 of 929 以下項的結果：

Drug Name	May be confused with
Abelcet (Amphotericin B Lipid Complex)	amphotericin B (Amphotericin B)
Accupril (Quinapril Hydrochloride)	Aciphex (Rabeprazole Sodium)
acetaZOLAMIDE (Acetazolamide)	acetoHEXAMIDE
Acetic Acid for Irrigation (Acetic Acid)	Glacial Acetic Acid (Acetic Acid)
acetoHEXAMIDE	acetaZOLAMIDE (Acetazolamide)
Aciphex (Rabeprazole Sodium)	Accupril (Quinapril Hydrochloride)



Drug Consults

跳轉到： [A](#) [B](#) [C](#) [D](#) [E](#) [F](#) [G](#) [H](#) [I](#) [J](#) [K](#) [L](#) [M](#) [N](#) [O](#) [P](#) [Q](#) [R](#) [S](#) [T](#) [U](#) [V](#) [W](#) [X](#) [Y](#) [Z](#) [0-9](#)

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Abbreviations


治療霍金森症的藥物

ABVD - USED FOR HODGKIN'S DISEASE

AC - USED FOR BREAST CANCER

AC - USED FOR MULTIPLE MYELOMA

ABVD - USED FOR HODGKIN'S DISEASE

藥物諮詢 

RESPONSE

Doxorubicin 25 mg/m(2) IV, days 1 and 15

Bleomycin 10 units/m(2) IV, days 1 and 15

VinBLAStine 6 mg/m(2) IV, days 1 and 15

Dacarbazine 350 to 375 mg/m(2) IV, days 1 and 15

Repeat cycle every 28 days

Last Modified: July 01, 2014

Displaying 3 of 78 results for "REMS"

[Fentanyl](#)**類鴉片止痛劑**

Elements to Assure Safe Use, Implementation System, Medication Guide

[Fentanyl Citrate](#)

Elements to Assure Safe Use, Implementation System, Medication Guide

[Fingolimod Hydrochloride](#)**Fentanyl**Drug Classes: [Analgesic](#) | [Central Nervous System Agent](#) | [All](#)Routes: **Sublingual** | **Transdermal****簡要解答**

深入解答

全部結果

連結到藥品安全訊息和用藥指南**Dosing/Administration**

Adult Dosing

Pediatric Dosing

FDA Uses

Non-FDA Uses

Dose Adjustments

Administration

Comparative Efficacy

Place In Therapy

Medication Safety

Contraindications

Medication Safety**REMS** 列印**Summary**

- to reduce serious adverse outcomes (eg, addiction, unintentional overdose, death) resulting from inappropriate prescribing, misuse, and abuse of extended-release or long-acting opioid analgesics while maintaining patient access to pain medications
- to mitigate the risk of misuse, abuse, addiction, overdose and serious complications due to medication errors by: prescribing and dispensing transmucosal immediate release fentanyl medicines only to appropriate patients, which includes use only in opioid-tolerant patients; preventing inappropriate conversion between transmucosal immediate release fentanyl medicines; preventing accidental exposure to children and others for whom it was not prescribed



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NeoFax® / Pediatrics

其他工具 ▼

Fentanyl

Drug Classes: [Analgesic](#) | [Central Nervous System Agent](#) | [All](#)

Routes: **Sublingual** | **Transdermal**

Fentanyl ▼

簡要解答

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Non-FDA Uses

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Black Box Warning

REMS

Drug Interactions (single)

IV Compatibility (single)

Pregnancy & Lactation

Monitoring

Do Not Confuse

Treatment

Medication Safety

REMS

Summary

- to reduce serious adverse outcomes (eg, addiction, unintentional overdose, death) resulting from inappropriate prescribing, misuse, and abuse of extended-release or long-acting opioid analgesics while maintaining patient access to pain medications
- to mitigate the risk of misuse, abuse, addiction, overdose and serious complications due to medication errors by: prescribing and dispensing transmucosal immediate release fentanyl medicines only to appropriate patients, which includes use only in opioid-tolerant patients; preventing inappropriate conversion between transmucosal immediate release fentanyl medicines; preventing accidental exposure to children and others for whom it was not prescribed
- to educate prescribers, pharmacists, and patients on the potential for misuse, abuse, addiction, and overdose of transmucosal immediate release fentanyl medicines
- to inform patients or caregivers about the serious risks associated with transmucosal immediate release and extended-release or long-acting fentanyl treatment

REMS Components

- Medication Guide
- Elements to Assure Safe Use
- Implementation System

Medication Guide

1.減少不良的後果(成癮、無心過量、死亡)
2.減輕誤用、濫用、過量、成癮的風險

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- Type 2 Diabetes Combination Approved
- Expanded Approval of Vyvanse(R) for...
- Combination Treatment Approved for HIV-1
- New HIV Combination Drug Approved
- New Hemodialysis Iron Replacement

Read Top News



支援和訓練

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- Clinical Consulting & Services
- Integrated Content Options for MU & More
- Tips & Tricks
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Support Request



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- 黑框警告
- Comparative Tables
- Do Not Confuse Drug List
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- Drug Consults
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Diabetes mellitus type I

Drugs that treat Diabetes mellitus type I

Drugs that cause Diabetes mellitus type I

Diabetes mellitus type II

Drugs that treat Diabetes mellitus type II

Drugs that cause Diabetes mellitus type II



最新消息

- What's Your Micromedex Experience?...
- Zika Virus Case in Texas

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DIABETES MELLITUS TYPE 2 IN ADOLESCENTS

Alternative Medicine: Evidence based herbal and dietary information for the patient (AltCareDex®)

DIABETES MELLITUS TYPE 2 IN ADULTS

Alternative Medicine: Evidence based herbal and dietary information for the patient (AltCareDex®)

COMPARISON OF DIABETIC KETOACIDOSIS IN PATIENTS WITH TYPE-1 AND TYPE-2 DIABETES MELLITUS

Disease: Emergency Medical Abstracts from Rick Bukata, MD and Jerry Hoffman, MD (Emergency Medical Abstracts®)

ACARBOSE

Toxicology: Detailed evidence-based information

...glycemic control in patients with **type 2 diabetes mellitus**. B PHARMACOLOGY: Acarbose lowers postprandial blood glucose concentrations in patients...

THIAZOLIDINEDIONE ANTIDIABETIC AGENTS

Toxicology: Detailed evidence-based information

...hypoglycemic agents used to treat **type II diabetes mellitus**. B PHARMACOLOGY: Decreases hepatic glucose production. Increases insulin sensitivity in...

MIGLITOL

Toxicology: Detailed evidence-based information

...glycemic control in patients with **type 2 diabetes mellitus**. B PHARMACOLOGY: By reversibly inhibiting alpha-glucoside hydrolase enzymes which...

列出治療二型
糖尿病的所有
藥物

可輸入成份或是商品名稱

查詢藥物



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常見藥品諮詢問題種類

- 劑量(肝腎功能不良、老人、兒童)之調整及投藥方式
- 藥物不良反應
- 藥品交互作用
- 藥物動力學
- 適應症
- 中毒或藥品過量的處理
- 藥品鑑定、辨識
- 懷孕及哺乳之用藥考量
- 其他，如：相容性、禁忌、費用、配製、安定性、貯存及健保規範等

藥師綜合個案的問題

- 醫生考慮

一位65歲有**心房顫動合併高血壓**的病人，
應該使用抗凝血藥物預防中風嗎？

- 病人需求

本人表示之前曾使用過aspirin，但覺得吃了
胃不舒服，所以不太喜歡...

- 家屬關心


擔心使用抗凝血藥物預防中風，是否會增
加出血風險？

利用Micromedex尋求支持的證據


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1. 考量問題：此藥物的適應症為何？

TRUVEN HEALTH ANALYTICS
MICROMEDEX® SOLUTIONS

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Warfarin



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Warfarin Sodium [您的搜尋：Warfarin]

Drug Classes: [Anticoagulant](#) | [Blood Modifier Agent](#) | [All](#)

Routes: [Intravenous](#) | [Oral](#)

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請參閱 '簡要解答' 瞭解綜述結果。

Warfarin Sodium

[Anticoagulant therapy, Genotype-guided](#)
[Antiphospholipid syndrome](#)
[Atrial fibrillation - Thromboembolic disorder](#)
[Atrial fibrillation - Thromboembolic disorder; Prophylaxis](#)
[Calcinosis universalis](#)
[Cancer; Adjunct](#)
[Cancer; Prophylaxis](#)
[Cancer - Venous thromboembolism](#)
[Cancer - Venous thromboembolism; Prophylaxis](#)
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FDA Uses

Warfarin



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其他

22% in patients receiving no antithrombotic therapy [37].

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

FDA Labeled Indication

a) Overview

FDA Approval: Adult, yes; Pediatric, no

Efficacy: Adult, Effective

Recommendation: Adult, Class I

Strength of Evidence: Adult, Category A

See Drug Consult reference: [RECOMMENDATION AND EVIDENCE RATINGS](#)

b) Summary:

According to guidelines from the American College of Chest Physicians, patients with atrial fibrillation and intermediate or high risk of stroke, oral anticoagulation is recommended; dabigatran is suggested rather than adjusted-dose vitamin K antagonist such as warfarin [9]

Effective for the prevention of thromboembolic events in patients with atrial fibrillation [8]

High-risk patients should receive adjusted-dose warfarin for an INR between 2 and 3 [10]

是否為核准的
適應症用藥？
有證據等級與
建議強度嗎？

檢視證據等級與建議強度

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藥物諮詢

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RESPONSE

The Micromedex Efficacy, Strength of Evidence and Strength of Recommendation definitions are outlined below:

Table 1. Strength Of Recommendation

Class I	Recommended	The given test or treatment has been proven to be useful, and should be performed or administered.
Class IIa	Recommended, In Most Cases	The given test, or treatment is generally considered to be useful, and is indicated in most cases.
Class IIb	Recommended, In Some Cases	The given test, or treatment may be useful, and is indicated in some, but not most, cases.
Class III	Not Recommended	The given test, or treatment is not useful, and should be avoided.
Class Indeterminate	Evidence Inconclusive	

Table 2. Strength Of Evidence

Category A	Category A evidence is based on data derived from: Meta-analyses of randomized controlled trials with homogeneity with regard to the directions and degrees of results between individual studies. Multiple, well-done randomized clinical trials involving large numbers of patients.
Category B	Category B evidence is based on data derived from: Meta-analyses of randomized controlled trials with conflicting conclusions with regard to the directions and degrees of results between individual studies. Randomized controlled trials that involved small numbers of patients or had significant methodological flaws (e.g., bias, drop-out rate, flawed analysis, etc.). Nonrandomized studies (e.g., cohort studies, case-control studies, observational studies).
Category C	Category C evidence is based on data derived from: Expert opinion or consensus, case reports or case series.
No Evidence	

Therapeutic Uses

2. 考量問題：使用抗凝血藥物是否可顯著降低中風危險？

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

FDA Labeled Indication

a) Overview

FDA Approval: Adult, yes; Pediatric, no

Efficacy: Adult, Effective

Recommendation: Adult, Class I

Strength of Evidence: Adult, Category A

See Drug Consult reference: [RECOMMENDATION AND EVIDENCE RATINGS](#)

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According to guidelines from the American College of Chest Physicians, patients with atrial fibrillation and intermediate or high risk of stroke, oral anticoagulation is recommended; dabigatran is suggested rather than adjusted-dose vitamin K antagonist such as warfarin [9]

Effective for the prevention of thromboembolic events in patients with atrial fibrillation [8]

High-risk patients should receive adjusted-dose warfarin for an INR between 2 and 3 [10]

The use of adjusted-dose warfarin was effective in reducing the incidence of composite outcome of fatal and nonfatal disabling stroke (ischemic or hemorrhagic), intracranial hemorrhage, and other clinically significant arterial embolism among patients 75 years or older with chronic atrial fibrillation or atrial flutter, with no significant difference on major extracranial hemorrhage [11]

根據Guideline
的建議有...

療效與出血
風險描述

FDA Labeled Indication

a) Overview

FDA Approval: Adult, yes; Pediatric, no

Efficacy: Adult, Effective

Recommendation: Adult, Class I

Strength of Evidence: Adult, Category A

See Drug Consult reference: [RECOMMENDATION AND EVIDENCE RATINGS](#)

檢視資訊來源

b) Summary:

According to guidelines from the American College of Chest Physicians, patients with atrial fibrillation and intermediate or high risk of stroke, oral anticoagulation is recommended; dabigatran is suggested rather than adjusted-dose vitamin K antagonist such as warfarin [9]

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REFERENCES

[9] You JJ, Singer DE, Howard PA, et al: Antithrombotic therapy for atrial fibrillation: Antithrombotic Therapy and Prevention of Thrombosis, 9th ed: American College of Chest Physicians Evidence-Based Clinical Practice Guidelines. Chest 2012; 141(2 suppl):e531S-e575S.
[PubMed Abstract: http://www.ncbi.nlm.nih.gov/...](http://www.ncbi.nlm.nih.gov/...)
[PubMed Article: http://www.ncbi.nlm.nih.gov/...](http://www.ncbi.nlm.nih.gov/...)

Comparative Efficacy

3. 考量問題：是否有更好的藥物選擇？

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Ancrod
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Ardeparin
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Clopidogrel
Dabigatran Etexilate Mesylate
Dalteparin
Danaparoid
Dextran
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Rivaroxaban
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有藥效說明

與類似藥物比較
的研究結果

Dabigatran Etexilate Mesylate

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

Venous thromboembolism

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

a) In the RE-LY trial, dabigatran 110 mg twice daily was as effective as warfarin in preventing stroke and systemic embolism with lower occurrence of major hemorrhage, while dabigatran 150 mg twice daily was more effective than warfarin at preventing stroke and systemic embolism with similar occurrence of major hemorrhage. Patients (mean age, 71 years)

Rivaroxaban

Atrial fibrillation - Thromboembolic disorder; Prophylaxis

a) Rivaroxaban was noninferior to warfarin for prevention of stroke and systemic embolism in patients with nonvalvular atrial fibrillation in the multicenter, randomized, double-blind Rivaroxaban Once Daily Oral Direct Factor Xa Inhibition Compared with Vitamin K Antagonism for Prevention of Stroke and Embolism Trial in Atrial Fibrillation (ROCKET AF) study (n=14,264). Patients with nonvalvular AF and moderate to high risk for stroke (CHADS2 score

Adverse Reactions

4. 考量問題：使用抗凝血藥物可能的副作用？

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Adverse Effects

請參閱 '簡要解答' 瞭解綜述結果。

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Cardiovascular Effects

Warfarin Sodium
[Cholesterol embolus syndrome](#)
[Gangrenous disorder](#)
[Hemopericardium](#)
[Vasculitis](#)

Cholesterol embolus syndrome

a) Summary

1) Systemic atheroemboli and cholesterol microemboli effecting solid organs and extremities, ranging from local necrosis to fatal cases, have occurred during warfarin therapy. Patients may present with

Hematologic Effects

Warfarin Sodium
[Anemia](#)
[Bleeding](#)
[Blood coagulation disorder](#)
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[Hemolytic anemia](#)
[Hemorrhage](#)

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Adverse Reactions

Hemorrhage

出血的危險因子

a) Summary

1) Risk factors for major or fatal bleeding in patients taking warfarin sodium include a higher starting INR, age 65 years or older, variable INRs, history of gastrointestinal bleeding, hypertension, cerebrovascular disease, serious heart disease, anemia, malignancy, trauma, renal insufficiency, concomitant drugs, and long duration of warfarin therapy [2]. Other risk factors for a major bleed occurring during warfarin anticoagulation are comorbid conditions, atrial fibrillation, and the first 90 days of warfarin therapy [130][131][132]. Regular monitoring of INR should be performed on all patients. More frequent monitoring, careful dose adjustment, and a shorter duration of therapy may be warranted for patients at high risk for bleeding [2].

針對不良反應之
處理建議

j) Treatment of Adverse Effects

1) The following are evidence-based guidelines from the American College of Chest Physicians for managing elevated INR or bleeding in patients on vitamin K antagonist (ie, warfarin) therapy [145].

a) INR above therapeutic range but less than 5 with no significant bleeding:

1) Lower warfarin dose or omit dose, monitor more frequently, and resume at lower dose when INR therapeutic; if only minimally above therapeutic range, no dose range reduction may be required.

b) INR equal to or greater than 5 but less than 9 with no significant bleeding:

1) Omit next 1 or 2 warfarin doses, monitor more frequently and resume at lower dose when INR in therapeutic range. Alternatively, omit dose and give vitamin K1 (5 mg or less ORALLY), particularly if at increased risk of bleeding. If more rapid reversal is required because the patient requires urgent surgery, vitamin K1 (2 to 4 mg ORALLY) can be given with the expectation that a reduction of the INR will occur in 24 hours. If the INR is still high, additional vitamin K1 (1 to 2 mg ORALLY) can be given.

Monitoring

5. 考量問題：使用抗凝血藥物須監測的項目/頻率？

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Monitoring

請參閱 '簡要解答' 瞭解綜述結果。

A) Warfarin Sodium

1) Therapeutic

a) Laboratory Parameters

1) INR

a) Monitor INR daily following the initial warfarin dose until the INR stabilized to the therapeutic range; then periodically based on clinical need, generally every 1 to 4 weeks. Perform additional INR testing when other warfarin products are interchanged with Coumadin(R) or when other drugs (including botanicals) are initiated, discontinued, have dosages changed, or taken irregularly. patients with a high risk of bleeding may require more frequent INR monitoring (manufacturer) [2].

b) Monitor INR up to every 12 weeks in patients with consistently stable INRs, defined as at least 3 months of consistent results with no need to adjust warfarin dosing. Evaluate the INR within 1 to 2 weeks if the patient experiences a single out of range value, below or above the therapeutic INR by 0.5 or less (American College of Chest Physicians guidelines) [1]

In general, the recommended target INR is 2.5 (range, 2 to 3) in adults and pediatric patients in most indications [112][1], except in the following situations:

Target INR is 3 (range 2.5 to 3.5):

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Patient Handouts

6. 考量問題：如何進行用藥指導？

Precautions	Tablet Take your medicine as directed. Your dose may need to be changed several times to find what works best for you. This medicine should come with a Medication Guide. Ask your pharmacist for a copy if you do not have one. Missed dose: Take a dose as soon as you remember. If it is almost time for your next dose, wait until then and take a regular dose. Do not take extra medicine to make up for a missed dose. Store the medicine in a closed container at room temperature, away from heat, moisture, and direct light. <u>Drugs and Foods to Avoid:</u> Ask your doctor or pharmacist before using any other medicine, including over-the-counter medicines, vitamins, and herbal products. Many medicines and foods affect how warfarin works and affect your PT/INR results. Tell your doctor before you start or stop any medicine, especially the following: Another blood thinner, including apixaban, cilostazol, clopidogrel, dabigatran, dipyridamole, heparin, prasugrel, rivaroxaban, ticlopidine NSAID pain or arthritis medicine, including aspirin, celecoxib, diclofenac, diflunisal, fenoprofen, ibuprofen, ketoprofen, ketorolac, naproxen, oxaprozin, piroxicam, sulindac (Check labels for over-the-counter medicines to find out if they contain an NSAID.) SSRI medicine (often treats depression or anxiety), including citalopram, desvenlafaxine, duloxetine, escitalopram, fluoxetine, fluvoxamine, milnacipran, paroxetine, sertraline, venlafaxine, vilazodone Ginkgo, echinacea, or St John's wort
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warfarin

SEARCH

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Drug Titles: (2 titles)

- ☐ [Warfarin \(Injection\) \(Injectable\)](#) 
- ☒ [Warfarin \(Oral\) \(Tablet\)](#) 

Warfarin (Oral) (Tablet) - DrugNote

Warfarin (By mouth)
Warfarin (WAR-far-in)

Prevents and treats blood clots. May lower the risk of serious complications after a heart attack. This medicine is a blood thinner.

Brand Name(s):Coumadin , Jantoven
There may be other brand names for this medicine.

When This Medicine Should Not Be Used:
This medicine is not right for everyone. Do not use it if you had an allergic reaction to warfarin, if you are pregnant, or if you have health problems that could cause bleeding.

How to Use This Medicine:
Tablet

- Take your medicine as directed. Your dose may need to be changed several times to find what works best for you.
- This medicine should come with a Medication Guide. Ask your pharmacist for a copy if you do not have one.
- **Missed dose:** Take a dose as soon as you remember. If it is almost time for your next dose, wait until then and take a regular dose. Do not take extra medicine to make up for a missed dose.
- Store the medicine in a closed container at room temperature, away from heat, moisture, and direct light.

Drugs and Foods to Avoid:
Ask your doctor or pharmacist before using any other medicine, including over-the-counter medicines, vitamins, and herbal products.

- **Many medicines and foods affect how warfarin works** and affect your PT/INR results. Tell your doctor before you start or stop any medicine, especially the following:
 - Another blood thinner, including apixaban, cilostazol, clopidogrel, dabigatran, dipyridamole, heparin, prasugrel, rivaroxaban, ticlopidine
 - NSAID pain or arthritis medicine, including aspirin, celecoxib, diclofenac, diflunisal, fenoprofen, ibuprofen, ketoprofen, ketorolac, naproxen, oxaprozin, piroxicam, sulindac (Check labels for over-the-counter medicines to find out if they contain an NSAID.)
 - SSRI medicine (often treats depression or anxiety), including citalopram, desvenlafaxine, duloxetine,

Location: Shou Ray Information Service Co.



Print List (2)

2 documents were added to the Print List. There are now 2 documents in the [Print List](#).

Add to Print List

Customize

Print

DrugNote			
		<input type="checkbox"/>	ALL
Drug Titles	Document Type	✓ Languages	Preview (English)
Warfarin (Oral) (Tablet)	DrugNote	<div><div><input checked="" type="checkbox"/> English</div><div><input type="checkbox"/> Spanish</div><div><input type="checkbox"/> Arabic</div><div><input type="checkbox"/> Chinese (Simpli...</div><div><input checked="" type="checkbox"/> Chinese (Tradit...</div><div><input type="checkbox"/> French (Canadia...</div><div><input type="checkbox"/> German</div><div><input type="checkbox"/> Italian</div><div><input type="checkbox"/> Japanese</div><div><input type="checkbox"/> Korean</div><div><input type="checkbox"/> Polish</div><div><input type="checkbox"/> Portuguese (Bra...</div><div><input type="checkbox"/> Russian</div><div><input type="checkbox"/> Turkish</div><div><input type="checkbox"/> Vietnamese</div></div>	
		<div>Add to Print List</div>	<div>Customize</div> <div>Print</div>

華法林 (Warfarin) (口服)
華法林 (Warfarin) (WAR-far-in)

用於預防或治療血凝塊。可降低心臟病發作後出現嚴重併發症的風險。本藥是一種抗凝血劑。

品牌名稱： Coumadin, Jantoven
這種藥物可能有其他品牌名稱。

下列狀況不宜使用此藥物：

並非所有人都適合本藥。如果您對華法林有過敏反應，或懷有身孕，請勿服用此藥。如果您有任何會造成出血的健康問題，請告知您的醫師。

藥物使用方法： 錠劑

- 請依照指示服藥。為達最佳療效，您的服用劑量可能需要經過多次調整。
- 本藥應附有一張「用藥說明」。如果您沒有，請向藥劑師索取。
- **漏服的劑量：**請在記起後儘快服用。如果已經快到下一次服藥時間，則等到該時間再照常服藥。切勿因為之前漏服而增加服藥劑量。
- 請將藥物儲存在加蓋容器中並置於室溫下。避免高溫、潮濕及陽光直射。

應避免的藥物和食物：

在服用其他任何藥物 (包括非處方藥、維他命及草本補給品) 之前，請先詢問您的醫師或藥劑師。

- 許多藥物或食物可能會影響華法林的功效和您的 PT/INR 檢驗結果。在您開始或停止服用任何藥物前，請務必告知您的醫師。這些藥物包括不需要處方即可購買的維他命、藥草和營養品，例如銀杏、紫錐花和貫葉連翹 (St John's Wort) 等。請隨身攜帶您的用藥清單。
- 告知醫師您目前正在服用的所有藥物，包括下列項目：
 - 抗凝血藥物，例如 Coumadin®、阿加曲班 (argatroban)、阿斯匹靈 (aspirin)、比伐盧定 (bivalirudin)、西洛他唑 (cilostazol)、氯吡格雷 (clopidogrel)、達比加群 (dabigatran)、潘生丁 (dipyridamole)、地西盧定 (desirudin)、肝磷脂 (heparin)、來匹盧定 (lepirudin)、普拉格雷 (prasugrel)、梯可比定 (ticlopidine)
 - 非類固醇類消炎止痛藥或關節炎藥物，例如塞來昔布 (celecoxib)、雙氯芬酸 (diclofenac)、待福索 (diflunisal)、非諾洛芬 (fenoprofen)、布洛芬 (ibuprofen)、消炎痛 (indomethacin)、可多普洛菲 (ketoprofen)、克多羅多克 (ketorolac)、扑濕痛 (mefenamic acid)、甲氧萘酸 (naproxen)、奧沙普秦 (oxaprozin)、匹洛西卡 (piroxicam)、蘇林達克 (sulindac)
 - 治療憂鬱症的 SSRI 藥物，例如西酞普蘭 (citalopram)、去甲文拉法辛 (desvenlafaxine)、度洛西汀 (duloxetine)、依地普肅 (escitalopram)、氟西汀 (fluoxetine)、氟伏沙明 (fluvoxamine)、米那普倫 (milnacipran)、帕羅西汀 (paroxetine)、舍曲林 (sertraline)、維拉法辛 (venlafaxine)、維拉佐酮 (vilazodone)
- 每天攝取同樣份量的維他命 K，能讓華法林發揮最佳功效。富含維他命 K 的食物包括蘆筍、花椰菜、球芽甘藍、小白菜、綠葉蔬菜、洋李、大黃莖和蔬菜油 (例如菜籽油)。如果您的飲食有大幅度的改變，請告知您的醫師。
- 請勿飲用大量的小紅莓汁或葡萄柚汁。詢問醫師每日攝取多少果汁是安全的。

服藥警告事項：

- 在懷孕時服用本藥並不安全。它可能對未出生的胎兒造成傷害。如果發現懷孕，請立即告知您的醫師。
- 如果您正在哺乳或有任何可能造成嚴重出血的病症 (例如胃潰瘍或血友病)，請告知您的醫師。如果您患有蛋白質 C 缺乏症、高血壓、糖尿病，最近動過外科手術或曾經受傷，或是有中風或肝磷脂 (heparin) 引發的問題的病史，請告知您的醫師。如果您有腎臟疾病、肝臟疾病、心臟疾病、癌症或有像貧血症等血液方面的疾病，請告知您的醫師。
- 服用本藥時，您可能更容易出血或瘀傷。出血情況可能加劇或危及生命。請勿從事激烈運動、小心尖銳的物品、使用牙刷或牙線清潔牙齒時不要太用力，以免受傷或造成傷口。輕輕擤鼻涕。請勿擤鼻孔。
- **您必須接受 PT/INR 之類的驗血**，檢查血液的凝結情況。醫師可能會根據您的 PT/INR 檢驗結果更改您服用的華法林劑量。醫師會告知您需多久做一次檢驗。請準時赴診。
- 請檢查所有藥物標籤，確認藥物不含華法林或非類固醇類消炎止痛藥或關節炎藥物。如果同時服用華法林和非類固醇類消炎止痛藥，或是華法林服用過量，可能會引發嚴重的出血問題。
- 本藥可能會引發下列嚴重問題：
 - 壞疽 (皮膚或組織受損)
 - 紫趾症候群
- 攜帶身分證或穿戴醫用識別手環，讓急救醫師知道您正在服用華法林。
- 告訴治療您的所有醫師或牙醫，您正在服用此藥。在您進行外科手術或醫學檢查之前，可能需要停藥幾天。
- 請將所有藥物存放在兒童夠不到的地方。千萬不要與任何人共用藥物。



主頁	藥物 相互作用	IV 相容性	藥物 鑒定	藥物 比較	CareNotes®	NeoFax® / Pediatrics	其他工具 ▼
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工具好幫手

藥物交互作用



主頁

藥物
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NeoFax® / Pediatrics

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藥物相互作用

在搜尋欄位鍵入藥物名稱（品牌或學名藥）。選擇藥物並按一下 >（新增）。

輸入搜尋詞：

Warfarin

相符的藥物名稱：(3)

Warfarin
Warfarin Sod
Warfarin Sodium

要檢查的藥物：

Bilberry
Calendula (Pot Marigold)
Losartan Potassium
Warfarin

Add Allergies

金盞花

抗高血
壓藥物

帶有星號 (*) 的字母大寫項目表示過敏。

清除

提交

藥物相互作用

在搜尋欄位鍵入藥物名稱（品牌或學名藥）。選擇藥物並按一下 ➤（新增）按鈕。

輸入搜尋詞：

Warfarin

相符的藥物名稱: (3)

Warfarin
Warfarin Sod
Warfarin Sodium

要檢查的藥物：

Bilberry
Calendula (Pot Marigold)
Losartan Potassium
Warfarin
ASPIRIN*

Add Allergies

新增過敏症狀。

在搜尋欄位中鍵入過敏症狀。選擇過敏症狀並按一下 ➤（新增）按鈕。
按一下「更新」將您的選擇加入至「藥物相互作用」中「要檢查的藥物」表單。

輸入過敏症狀：

asp

相符的過敏症狀: (8)

ASPARAGINASE
ASPARAGINE
ASPARAGUS
ASPARTAME
ASPARTIC ACID
ASPERGILLUS FUMIGATUS
ASPIRIN INTOLERANCE
ASPIRIN

要檢查的過敏症狀：

ASPIRIN

取消

更新

Drug Interaction Results

← 修改相互作用

細化方式： 藥物： All 嚴重性： All 文件： All 類型： All

跳轉到： 藥物-藥物 (1) | 複方 (0) | 過敏症狀 (0) | 食物 (7) | 乙醇 (1) | 實驗室 (0) | 抽煙 (1) | 懷孕 (2) | 哺乳期 (2)

Drug-Drug 相互作用 (1)

藥物：	嚴重性：	文件：	綜述：
BILBERRY -- WARFARIN SODIUM	 Moderate	Fair	Concurrent use of BILBERRY and ANTICOAGULANTS may result in increased risk of bleeding.

複方 (未找到)

Drug-過敏症狀 相互作用 (未找到)

Drug-食物 相互作用 (7)

藥物：	嚴重性：	文件：	綜述：
WARFARIN SODIUM	 Major	Good	Concurrent use of WARFARIN and POMEGRANATE may result in increased warfarin plasma concentrations and increased risk of bleeding.

Warfarin和
歐越莓併用
會增加出血
風險

INTERACTION DETAIL

Warning:

Concurrent use of BILBERRY and ANTICOAGULANTS may result in increased risk of bleeding.

Clinical Management:

Caution is advised if bilberry is taken with an anticoagulant. Monitor the patient closely for signs and symptoms of bleeding. Adjust the anticoagulant dose only if the patient is consistently taking bilberry with a consistent and standardized product.

Onset:

Delayed

Severity:

Moderate

Documentation:

Fair

INTERACTION DETAIL

Probable Mechanism:

additive antiplatelet effects

Summary:

Theoretically, bilberry may potentiate the effects of anticoagulants. One case report describes a patient taking several herbal medicines including bilberry (*Vaccinium myrtillus* (VMA)) who developed substantial postoperative bleeding (Norred & Finlayson, 2000). Oral doses of VMA (Myrtocyan®), inhibited platelet aggregation in humans (Pulliero et al, 1989). VMA inhibited platelet aggregation and prolonged bleeding time in rabbits (Morazzoni & Magistretti, 1990). VMA increased production of prostaglandin I₂-like substances in vascular tissues in rats, leading to enhanced anti-aggregatory mechanisms (Morazzoni & Magistretti, 1986).

Literature:

A 60-year-old female taking several undisclosed dietary supplements up to the day of surgery (left modified radical mastectomy with sentinel node biopsy and right breast reduction) experienced substantial postoperative bleeding. Herbal supplements included bilberry, ginkgo, huang qi (astragalus), and ginseng. Vitamin supplements included vitamin E, vitamin C, and vitamin B12. Prescription medications included montelukast, albuterol, salmeterol, fluticasone, quinine, and sertraline. Preoperative labs were normal except for a slightly prolonged prothrombin time of 15.6 seconds (reference range, 10.2 to 12.3 seconds), and INR 1.27 (normal 1). The patient and surgeons

列印 關閉

Drug Interaction Results

修改相互作用

細化方式： 藥物： All 嚴重性： 2 (Selected) 文件： All 類型： All

跳轉到： 食物 (2) | 懷孕 (2) | 哺乳期 (1)

Drug-食物 相互作用 (2)

藥物：	嚴重性：	文件：	綜述：
WARFARIN SODIUM	 Major	Good	Concurrent use of WARFARIN and POMEGRANATE may result in increased warfarin plasma concentrations and increased risk of bleeding.
WARFARIN SODIUM	 Major	Good	Concurrent use of WARFARIN and CRANBERRY JUICE may result in an increased risk of bleeding.

Drug-懷孕 相互作用 (2)

藥物：	嚴重性：	文件：	綜述：
WARFARIN SODIUM	 Contraindicated	Unknown	Warfarin is rated as US FDA Category X. Studies, adequate well-controlled or observational, in animals or pregnant women have demonstrated positive evidence of fetal abnormalities. The use of the product is contraindicated in women who are or may become pregnant.
LOSARTAN POTASSIUM	 Major	Unknown	Losartan is rated as US FDA Category D. Studies, adequate well-controlled or observational, in pregnant women have demonstrated a risk to the fetus. However, the benefits of therapy may outweigh the potential risk.

Drug-哺乳期 相互作用 (1)

藥物：	嚴重性：	文件：	綜述：
LOSARTAN POTASSIUM	 Major	Unknown	Infant risk cannot be ruled out: Available evidence and/ or expert consensus is inconclusive or is inadequate for determining infant risk when Losartan is used during breast-feeding. Weigh the potential benefits of treatment against potential risks before prescribing Losartan during breast-feeding.

定義

嚴重性：  禁忌  嚴重  中等  軟弱  未知

文件： 卓越 良好 一般 未知

選中/取消選中以細化嚴重性設定。

全部選中 | 全部不選

- ☒ Contraindicated
- ☒ Major
- ☐ Moderate
- ☐ Minor
- ☐ Unknown

取消

更新

藥物比較

搜尋 Micromedex



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其他工具 ▼

藥物比較

在搜尋欄位鍵入藥物名稱（品牌或學名藥）。選擇藥物並按一下 ➤（新增）按鈕。

輸入搜尋詞：

Warfarin

相符的藥物名稱: (2)

Warfarin Na
Warfarin Sodium

要檢查的藥物：

Dabigatran Etexilate Mesylate
Rivaroxaban
Warfarin Sodium



清除

提交

藥物比較(適應症)_證據等級

在欄中顯示 1

在欄中顯示 2

Warfarin Sodium

Dabigatran Etexilate Mesylate

更新

跳轉到: [↑ 頁首](#) | [Dosing & Indications](#) | [Black Box Warning](#) | [Contraindications/Warnings](#) | [Drug Interactions \(single\)](#) | [Adverse Effects](#) | [Name Info](#) | [Mechanism of Action/Pharmacokinetics](#) | [Administration/Monitoring](#) | [How Supplied](#) | [Toxicology](#) | [Clinical Teaching](#) | [References](#)

Warfarin Sodium

FDA-Labeled Indications

檢視 DRUGDEX 中的詳細資訊 ▶

→ Atrial fibrillation - Thromboembolic disorder; Prophylaxis
FDA Approval:

- Adult, yes
- Pediatric, no

Efficacy:

- Adult, Effective

→ Strength of Recommendation:

- Adult, Class I

Strength of Evidence:

- Adult, Category A

Dabigatran Etexilate Mesylate

FDA-Labeled Indications

檢視 DRUGDEX 中的詳細資訊 ▶

→ Atrial fibrillation - Thromboembolic disorder; Prophylaxis
FDA Approval:

- Adult, yes
- Pediatric, no

Efficacy:

- Adult, Effective

→ Strength of Recommendation:

- Adult, Class IIa

Strength of Evidence:

- Adult, Category B

藥物比較(不良反應)_一般/嚴重

在欄中顯示 1

在欄中顯示 2

Warfarin Sodium

Dabigatran Etexilate Mesylate

更新

跳轉到：[↑ 頁首](#) | [Dosing & Indications](#) | [Black Box Warning](#) | [Contraindications/Warnings](#) | [Drug Interactions \(single\)](#) | [Adverse Effects](#) | [Name Info](#) | [Mechanism of Action/Pharmacokinetics](#) | [Administration/Monitoring](#) | [How Supplied](#) | [Toxicology](#) | [Clinical Teaching](#) | [References](#)

Adverse Effects

檢視 DRUGDEX 中的詳細資訊 ▶

Common

- **Dermatologic:** Alopecia

Serious

- **Cardiovascular:** Cholesterol embolus syndrome, Gangrenous disorder (less than 0.1%)
- **Dermatologic:** Tissue necrosis (less than 0.1%)
- **Hematologic:** Bleeding, Hemorrhage
- **Immunologic:** Hypersensitivity reaction
- **Musculoskeletal:** Compartment syndrome
- **Neurologic:** Intracranial hemorrhage
- **Ophthalmic:** Intraocular hemorrhage

Adverse Effects

檢視 DRUGDEX 中的詳細資訊 ▶

Common

- **Gastrointestinal:** Esophagitis, Gastritis, Gastroesophageal reflux disease (DVT and pulmonary embolism, 3%), Gastrointestinal hemorrhage (DVT and pulmonary embolism, 0.3% to 3.1%; stroke and systemic embolism, 6.1%), Gastrointestinal ulcer, Indigestion (DVT and pulmonary embolism, 7.5%)
- **Hematologic:** Bleeding (16.6%)

Serious

- **Cardiovascular:** Myocardial infarction (DVT and pulmonary embolism, 0.32% to 0.66%; stroke and systemic embolism, 0.7%)
- **Gastrointestinal:** Gastrointestinal hemorrhage, Major (1.6%)
- **Hematologic:** Bleeding, Major or Life Threatening (DVT and pulmonary embolism, 0.3% to 1.4%; stroke and systemic embolism, 1.5% to 3.3%), Thrombosis
- **Immunologic:** Anaphylaxis
- **Neurologic:** Epidural hematoma, Intracranial hemorrhage (stroke and systemic embolism, 0.3%; DVT and pulmonary embolism, 0.1%), Traumatic spinal subdural hematoma
- **Respiratory:** Bleeding, Alveolar

藥物比較-切換另一藥物

在欄中顯示 1 在欄中顯示 2

Warfarin Sodium Rivaroxaban

更新

跳轉到: [↑ 頁首](#) | [Dosing & Indications](#) | [Black Box Warning](#) | [Contraindications](#) | [Adverse Effects](#) | [Name Info](#) | [Mechanism of Action/Pharmacokinetics](#) | [Administration/Monitoring](#) | [How Supplied](#) | [Toxicology](#) | [Clinical Teaching](#) | [References](#)

Adverse Effects	Adverse Effects
檢視 DRUGDEX 中的詳細資訊 ▶	檢視 DRUGDEX 中的詳細資訊 ▶
Common	Common
<ul style="list-style-type: none">■ Dermatologic: Alopecia	<ul style="list-style-type: none">■ Hematologic: Bleeding (hip/knee replacement, 5.8%; DVT/pulmonary embolism: 17.4% to 28.3%)
Serious	Serious
<ul style="list-style-type: none">■ Cardiovascular: Cholesterol embolus syndrome, Gangrenous disorder (less than 0.1%)■ Dermatologic: Tissue necrosis (less than 0.1%)■ Hematologic: Bleeding, Hemorrhage■ Immunologic: Hypersensitivity reaction■ Musculoskeletal: Compartment syndrome■ Neurologic: Intracranial hemorrhage■ Ophthalmic: Intraocular hemorrhage	<ul style="list-style-type: none">■ Cardiovascular: Syncope (1.2%)■ Gastrointestinal: Gastrointestinal hemorrhage (nonvalvular atrial fibrillation, 3.1%)■ Hematologic: Bleeding, Major (nonvalvular atrial fibrillation, 5.6%; hip/knee replacement, 0.3%; DVT/pulmonary embolism, 1%), Epidural hematoma, Hematoma, Spinal■ Immunologic: Anaphylaxis, Immune hypersensitivity reaction■ Other: Drug withdrawal, Stroke and non-CNS embolism

多個藥物的IV相容性



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IV 相容性

在搜尋欄位鍵入藥物名稱（品牌或學名藥）。選擇藥物並按一下 ➤（新增）按鈕。

輸入搜尋詞:

pal

相符的藥物名稱: (2)

Palifermin

Palonosetron hydrochloride

要檢查的藥物:

Lorazepam

適用於焦慮
狀態

化療用藥

清除

提交

由 Trisnel's™ 2 Clinical Pharmaceutics Database (Parenteral Compatibility). 支援。

IV 索引包含 BAXTER HEALTHCARE CORPORATION 的機密資訊。嚴格禁止明確的被許可人之外的人員使用 IV 索引或

IV 相容性結果

修改相容性

列印

Key:

相容性: All

Y-Site

Admixture

Syringe

Y-Site Test Detail

Rating

Lorazepam - Palonosetron hydrochloride



相容

IV COMPATIBILITY DETAIL

Drug 1	Drug 2	狀態	資訊	測試參數
Lorazepam 0.5mg/mL in 5% D5W-Dextrose 5% Baxter Pharmaceutical Products	Palonosetron hydrochloride 0.05mg/mL (50 mcg/mL) in Undiluted MGI Pharma	相容	物理相容性: Physically compatible. No visible changes and no change in the measured haze level or particulates. 化學穩定性: Chemically stable. No loss of either drug occurred within the study period. 存放: Ambient conditions of about 23 °C exposed to normal fluorescent light.	參考: 2608 試驗期: 4 hours. 方法: Visual observation, electronic measurement of haze and particulates, and stability-indicating HPLC analysis of drug concentrations. 容器: Simulated Y-site administration using glass test tubes.

由 Triss

由 Trissel's™ 2 Clinical Pharmaceuticals Database (Parenteral Compatibility). 支援。

IV 索引包含 BAXTER HEALTHCARE CORPORATION 的機密資訊。嚴格禁止明確的被許可人之外的人員使用 IV 索引或其中包含的資訊。

All Drugs (2)

☒ 全部選中 | ☒ 全部不選

- ☒ Lorazepam
- ☒ Palonosetron hydrochloride

取消 更新

Tip: To see additional information on IV Solutions and TPN/TNA compatibility, select a single drug from the list and choose Update.

單一藥物的IV相容性

IV 相容性結果 ◀ 修改相容性



Selected Drug:  Palonosetron hydrochloride

Key :     

相容性: All ▾

All Drugs (2)

☒ 全部選中 | ☐ 全部不選

- ☐  Lorazepam
- ☒  Palonosetron hydrochloride

Solution Y-Site Admixture Syringe TPN/TNA

Common Solutions Test Detail

Rating

Solution Information

D5W (D5W-Dextrose 5%)



相容

[More Solution Information](#)

D10W (Dextrose 10%)



未測試

D5LR (Dextrose 5% in lactated Ringers)



相容

[More Solution Information](#)

D5NS (Dextrose 5% in sodium chloride 0.9%)



未測試

D5W - 1/2 NS (Dextrose 5% in sodium chloride 0.45%)



相容

[More Solution Information](#)

NS (Normal saline- Sodium chloride 0.9%)



相容

[More Solution Information](#)

1/2 NS (Sodium chloride 0.45%)



未測試

Other Solutions Test Detail

Rating

Solution Information

藥物鑒定_用印碼查詢

TRUVEN HEALTH ANALYTICS
MICROMEDEX® SOLUTIONS

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搜尋 Micromedex



主頁 | 藥物相互作用 | IV 相容性 | **藥物鑒定** | 藥物比較 | CareNotes® | NeoFax® / Pediatrics | 其他工具 ▼

藥物鑒定

搜尋：按照印碼 | [無印碼?](#) [按一下此處按以下條件搜尋說明](#) ▶

側面 1： ☐ 部分印記

側面 2： ☒ 部分印記

清除

搜尋

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藥物鑒定

藥物鑒定結果

← 修改鑒定

搜尋圖像 →

6 以下項的相符項: "mrk, 7"

按以下項排序所有結果: 印記 ▼

6 藥物相符 用於 'M'

1 - 6 (6 相符的藥物) ◀◀ 第一個 ◀ 前面 | 後面 ▶ 最後一個 ▶▶

顯示: ALL | 0-9 | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z

印記 ▼	藥物名稱	製造商	可用性	AAPCC	Poisindex 管理
MRK 711 Singlair	Singlair	Merck Sharp & Dohme	United States	201078	MONTELUKAST
MRK 717 HYZAAR	Hyzaar 50-12.5	Merck Sharp & Dohme	United States	077773	ANGIOTENSIN II ANTAGONISTS DIURETICS
MRK 747 HYZAAR	Hyzaar 100-25	Merck Sharp & Dohme	United States	077773	ANGIOTENSIN II ANTAGONISTS DIURETICS
Mrk; 717	Hyzaar	Merck Frosst	Canada	201079	ANGIOTENSIN II ANTAGONISTS DIURETICS
Mrk; 74; Vioxx	Vioxx	Merck Frosst	Canada	201065	COX-2 INHIBITORS
Mrk; 74; Vioxx	Vioxx	Merck & Company	United States	201065	COX-2 INHIBITORS

藥物資訊

藥物名稱: HYZAAR 50-12.5

成分: HYDROCHLOROTHIAZIDE -- 12.5 MG

LOSARTAN POTASSIUM -- 50 MG

相關文件: POISINDEX® MANAGERMENTS - ANGIOTENSIN II ANTAGONISTS

POISINDEX® MANAGERMENTS - DIURETICS

DRUGDEX® EVALUATIONS - LOSARTAN POTASSIUM/HYDROCHLOROTHIAZIDE

顏色: YELLOW

形狀: TEARDROP-SHAPE

印記: MRK 717, HYZAAR

劑型: ORAL TABLET

可用容器大小: BOTTLE OF 30, STRIP OF 100, BOTTLE OF 90, BOTTLE OF 5000, BOTTLE OF 1000

AAPCC 代碼: 077773 - ANTIHYPERTENSIVES (EXCLUDING DIURETICS)

NDC: 00006-0717-82

00006-0717-31

00006-0717-28

00006-0717-54

00006-0717-86

輔料: D&C YELLOW NO. 10 ALUMINUM

LAKE; HYDROXYPROPYL

CELLULOSE; HYPROMELLOSE; LACTOSE,

HYDROUS; MAGNESIUM

STEARATE; MICROCRYSTALLINE

CELLULOSE; PREGELATINIZED

STARCH; TITANIUM DIOXIDE

監管狀態: RX

可用性: UNITED STATES

產品 ID: 5421774

聯絡資訊: MERCK SHARP & DOHME

列印  關閉 



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列印  關閉 

藥物鑒定_用外觀查詢

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藥物鑒定

搜尋：按照說明 [按一下此處按以下條件搜尋印碼](#) ▶

- | | | | |
|---------------------------------|--|---------------------------------|------------------------------------|
| <input type="checkbox"/> Black | <input type="checkbox"/> Blue | <input type="checkbox"/> Brown | <input type="checkbox"/> Clear |
| <input type="checkbox"/> Gold | <input type="checkbox"/> Gray | <input type="checkbox"/> Green | <input type="checkbox"/> Off-White |
| <input type="checkbox"/> Orange | <input checked="" type="checkbox"/> Pink | <input type="checkbox"/> Purple | <input type="checkbox"/> Red |
| <input type="checkbox"/> Tan | <input type="checkbox"/> White | <input type="checkbox"/> Yellow | |

形狀：

Egg-shape ▼

圖譜：

Solid ▼



All Patterns
Banded
Solid
Speckled
Striped
Two-toned
Unknown

清除

搜尋

3 以下項的相符項："Egg-shape, Solid, Pink"

按以下項排序所有結果：

印記 ▼

1 藥物相符 用於 'A'

1 - 1 (1 相符的藥物) ◀◀ 第一個 ◀ 前面 | 後面 ▶ 最後一個 ▶▶

顯示： ALL | 0-9 | A | B | C | D | E | F | G | H | I | J | K | L | M | N | O | P | Q | R | S | T | U | V | W | X | Y | Z

[隱藏圖像](#)

圖像 (US)

印記 ▼

藥物名稱



AMOXIL 125

Amoxil

搭配專業術語查詢

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用來治療暈厥的藥

搜尋藥物、疾病、毒理學及其他資訊

Drugs that treat Syncope

Syncope

Drugs that treat Syncope

Drugs that cause Syncope

Syncope and collapse

Syncope attack

Drugs that treat Syncope attack

Drugs that cause Syncope attack

最新消息

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- Attending MUSE 2015? Start Here
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- Tips & Tricks
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用來治療暈厥的藥

drugs that treat syncope



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Drugs That Treat Syncope

顯示：[Effective \(0\)](#) | [Evidence Favors Efficacy \(6\)](#) | [Evidence is Inconclusive \(0\)](#) | [Ineffective \(0\)](#) | [Not Rated \(0\)](#)

Displaying 6 results for "Drugs That Treat Syncope"

▶ [Effective \(0 results\)](#)

▶ [Evidence Favors Efficacy \(6 results\)](#)

▶ [Evidence is Inconclusive \(0 results\)](#)

▶ [Ineffective \(0 results\)](#)

▶ [Not Rated \(0 results\)](#)

1. 有效
2. 有證據支持有效性
3. 證據支持是不確定
4. 無效
5. 沒評級

Displaying 6 results for "Drugs That Treat Syncope"

► Effective (0 results)

▼ Evidence Favors Efficacy (6 results)

藥物名稱	Indication	年齡組別
Acebutolol Hydrochloride	Syncope	Adult
Enalapril Maleate	Neurally-mediated syncope	Adult
Epinephrine	<u>Syncope, Due to complete heart block or carotid sinus hypersensitivity</u>	Adult
Midodrine Hydrochloride	Syncope	Adult
Nitroglycerin	Provocative test - Vasovagal syncope	Adult
Pindolol	Syncope	Adult

串聯至劑量 “adult dosing”

Epinephrine

Drug Classes: [Adrenergic](#) | [Alkylarylamine](#) | [All](#)

Routes: [Epidural](#) | [Inhalation](#) | [Injection](#) | [Intramuscular](#) | [Intravenous](#) | [Nasal](#)

簡要解答

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Non-FDA Uses

Dose Adjustments

Administration

Comparative Efficacy

Place In Therapy

Medication Safety

Contraindications

Precautions

Adverse Effects

Dosing/Administration



Adult Dosing

請參閱 [深入解答](#) 瞭解詳細結果。

- Anaphylaxis: (Auto-injector) Inject contents of 0.3-mg prefilled syringe IM or SUBQ; may repeat with an additional auto-injector if severe anaphylaxis persists [3][4]
- Anaphylaxis: (Injectable solution) 0.2 to 0.5 mg (0.2 to 0.5 mL of a 1:1000 solution) IM or SUBQ every 5 minutes as needed (guideline dosing) [5] OR 0.2 to 1 mg SUBQ (manufacturer dosing) [6]
- Anaphylaxis: (IV infusion) 1 mg (1 mL of 1:1000 solution) in 250 mL D5W (4 mcg/mL) and infuse IV at a rate of 1 mcg/min (15 mL/hr) to 10 mcg/min OR epinephrine 1 mg (1 mL of 1:1000 solution in 100 mL of NS (10 mcg/mL)) and infuse IV at an initial rate of 5 to 15 mcg/min (30 to 100 mL/hr) (guideline dosing) [5]
- Asthma: (injectable solution) 0.2 to 1 mg (0.2 to 1 mL of 1:1000 solution) SUBQ [6]
- Asthma: (inhalation) start with 1 inhalation (0.22 mg); if symptoms not relieved after at least 1 min, use once more; do not use again for at least 3 hr [7]
- Local anesthesia; Adjunct: (intrapinal) 0.2 to 0.4 mg added to anesthetic spinal fluid mixture [13]
- Local anesthesia; Adjunct - Obstetric procedure: 0.2 mg added to bupivacaine for hyperbaric spinal anesthesia for cesarean section (study dosing) [14]
- Syncope, Due to complete heart block or carotid sinus hypersensitivity: 0.2 to 1 mg (0.2 to 1 mL of 1:1000 solution) subQ or IM [6]

相關結果

毒理學

疾病

[Drug Availability](#)

[Drug Consults](#)

[eMC SmPC \(UK\)](#)

[Index Nominum](#)

[IT- Dialogo Sui Farmaci](#)

[Martindale](#)

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中草藥/保健食品



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靈芝_Indication

CORIOLUS VERSICOLOR



主頁 藥物相互作用 IV 相容性 藥物鑒定 藥物比較 CareNotes® NeoFax® / Pediatrics 其他工具 ▼

Coriolus Versicolor

簡要解答

深入解答

全部結果

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Contraindications

Pregnancy Category

Lactation

Drug Interactions (single)

Adverse Effects

Administration

How Supplied

Dosing & Indications

Indications

請參閱 '深入解答' 瞭解詳細結果。

- antioxidant (animal data)
- cancer
- cancer chemotherapy adjunct
- immune response



列印

相關結果

[Product Lookup - Martindale](#)

[Product Lookup - Tox & Drug](#)

靈芝_Adverse Reactions

Coriolus Versicolor

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Teratogenicity/ Effects In Pregnancy

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Cautions

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 檢視完整文件

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BLOOD

BLOOD EFFECTS

1) In a trial administering PSK, a protein-bound polysaccharide from Coriolus versicolor, to patients (n=448) receiving standard chemotherapy (mitomycin C and 5-fluorouracil) for colorectal cancer, more patients receiving PSK with chemotherapy experienced leukopenia resulting in abbreviated treatment than those receiving chemotherapy alone. In the group receiving chemotherapy alone, 2 patients (0.9%) had leukopenia for which treatment was abbreviated while 7 patients in the PSK group (3.2%) had such leukopenia (Mitomi et al, 1992).

GASTROINTESTINAL

GASTROINTESTINAL EFFECTS

1) Oral administration of PSP, a group of polysaccharide peptides from Coriolus versicolor, was frequently associated with the passage of dark colored stools. No blood was detected with fecal occult blood tests (Shiu et al, 1992).

2) In a trial administering PSK, a protein-bound polysaccharide from Coriolus versicolor, to patients receiving standard chemotherapy (mitomycin C and 5-fluorouracil) for colorectal cancer, more patients receiving PSK with chemotherapy experienced DIARRHEA resulting in abbreviated treatment than those receiving

propolis



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Propolis

簡要解答

深入解答

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Pregnancy Category

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Drug Interactions (single)

Adverse Effects

Administration

How Supplied

Dosing & Indications

Indications

請參閱 [深入解答](#) 瞭解詳細結果。

- asthma (possibly effective)
- dental plaque (inconclusive)
- dental hypersensitivity (possibly effective)
- herpes simplex type 2 (possibly effective)
- rhinopharyngitis (pediatric, inconclusive)
- sulcoplasty repair (inconclusive)



列印

相關結果

[毒理學](#)

[Martindale](#)

[Product Lookup - Martindale](#)

[Product Lookup - Tox & Drug
病人須知](#)



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propolis



主頁 | 藥物相互作用 | IV 相容性 | 藥物鑒定 | 藥物比較 | CareNotes® | NeoFax® / Pediatrics | 其他工具 ▼

Propolis

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 [列印](#)

SKIN

DERMATOLOGIC EFFECTS

- 1) A reaction to propolis occurred in 1.3% of subjects (n=2776) receiving patch testing with a locally revised standard series of 34 contact allergens (Wohrl et al, 2003).
- 2) A HYPERSENSITIVITY REACTION manifesting as inflamed and swollen lips and desquamation of lower lip mucosa was reported in a patient using propolis lozenges. Complete resolution occurred within 5 to 6 days of discontinuing propolis lozenges (Hay & Greig, 1990).
- 3) CONTACT DERMATITIS (edema, erythema, and vesiculation) occurred on a man's penis after application of a 10% alcoholic solution of propolis (Pincelli et al, 1984).

OTHER

- A) Adverse effects are common at doses greater than 15 grams/day (Castaldo & Capasso, 2002).

相關結果

毒理學

[Martindale](#)
[Product Lookup - Martindale](#)
[Product Lookup - Tox & Drug](#)
[病人須知](#)

毒理學

生殖風險資訊

REPROTOX

- BEE GLUE

相關結果

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BEE GLUE

Reprotax® ⓘ

藥物、化學品、感染和物理因素對懷孕、生育及發育的影響綜述

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頁首

Quick take: We have not located references on possible reproductive or lactation effects of propolis.

Propolis, or "bee glue," is a resinous material used by honeybees in building and sealing a hive. Primarily used topically, it can cause contact dermatitis, especially in those sensitive to Balsam of Peru. In addition to its topical use, propolis is ingested as a dietary supplement for various conditions and is used in rosin for stringed instruments. Although the composition varies widely depending on its source, one report suggested propolis usually contains 50% resin (often from *Populus* trees) and vegetable balsam, 30% wax, 10% essential and aromatic oils, 5% pollen, and 5% other (1).

Some constituents of propolis have topical antimicrobial or antifungal activity. A randomized controlled trial in 90 men and women with recurrent genital herpes found that topical propolis ointment healed lesions more quickly than acyclovir (#1014) or placebo ointments (2). Several caffeic acid esters found in propolis have antioxidant and anti-tumor effects (1).

Propolis 50 mg/kg/day was given to male rabbits for 12 weeks by an unspecified route. The treatment increased food intake, body weight, plasma testosterone, and testis and epididymis weight (3). There were also increases in semen volume, sperm motility, normal sperm, and seminal fluid fructose. Administration of this dose level by mouth to rats for 70 days had similar effects on plasma testosterone, sex organ weight, and sperm end points, which the authors assumed were beneficial (4). In the rabbit study, propolis treatment attenuated the adverse effects of treatment with an organotin compound (#1206), and in the rat study, propolis attenuated the adverse effects of treatment with aluminum chloride (#2586). A 2012 report using green Brazilian propolis also reported increased sperm production after animals were treated for 56 days (5).

We have not located references on possible lactation effects of this material.

Selected References

1. Burdock GA. Review of the biological properties and toxicity of bee propolis (propolis). *Food Chem Toxicol* 1998;36:347-363.
2. Vynograd N, Vynograd I, Sosnowski Z. A comparative multi-centre study of the efficacy of propolis, acyclovir, and placebo in the treatment of genital herpes. *Phytomedicine* 2000;7(1):1-6.
3. Yousef MI, Kamel KI, Hassan MS, El-Morsy AM. Protective role of propolis against reproductive toxicity of triphenyltin in male rabbits. *Food Chem Toxicol*. 2010 Jul;48(7):1846-52.
4. Yousef MI, Salama AF. Propolis protection from reproductive toxicity caused by aluminium chloride in male rats. *Food Chem Toxicol*. 2009 Jun;47(6):1168-75.
5. Capucho C, Sette R, de Souza Predes F, de Castro Monteiro J, Pigoso AA, Barbieri R, Dolder MA, Severi-Aguiar GD. Green Brazilian propolis effects on sperm count and epididymis morphology and oxidative stress. *Food Chem Toxicol*. 2012 Nov;50(11):3956-62. doi: 10.1016/j.fct.2012.08.027. PMID: 22951362.

/ars

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新聞事件CASE



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1家3口全中毒！熬「高山薊」保肝 竟肚絞痛腸阻塞



NOWnews生活中心

2015年 05月 24日 13:37

25

8+1

生活中心／台北報導

保肝、養身，國內不少人瘋飲俗稱「雞角刺」的高山薊，但過量當心不良反應！台北榮總日前就接獲國內首見、一家3口人喝湯中毒案例，一名60多歲的婦人，用自宅栽種的高山薊熬湯，沒想到一鍋湯害得自己、先生和先生的妹妹全中毒，出現頭暈、嘔吐、肚痛症狀，婦人更因劇烈絞痛，小腸阻塞，嚴重到必須動手術。



▲最具影響力的新聞，都在NOWnews今日新聞。

高山薊含有水飛薊素，是目前保肝藥的主要成分

Milk Thistle

簡要解答

深入解答

全部結果

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Adverse Effects

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請參閱 ['深入解答'](#) 瞭解詳細結果。

- alcohol intoxication, acute (ineffective)
- antioxidant
- cancer (animal data)
- diabetes (inconclusive data)
- edema (animal data)
- liver disease
- hepatitis
- hepatoprotectant (inconclusive data)
- hepatotoxicity (inconclusive data)
- immunostimulant (animal and in vitro data)
- intrahepatic cholestasis of pregnancy (ICP) (ineffective)
- lipid composition
- mushroom poisoning

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相關結果

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藥物](#)

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高山薊含有水飛薊素

Silymarin



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3.8.2) CLINICAL EFFECTS

A) GASTROINTESTINAL COMPLICATION

1) WITH POISONING/EXPOSURE

a) CASE REPORT: Intermittent episodes of sweating, nausea and vomiting, colicky abdominal pain, diarrhea, weakness, and collapse occurred in a 57-year-old woman following daily administration of milk thistle capsules for 2 months. The duration of each episode was approximately 24 hours. The patient recovered spontaneously following discontinuation of the capsules; however, rechallenge with one milk thistle capsule resulted in a recurrence of symptoms (Anon, 1999).

3.8.3) ANIMAL EFFECTS

A) ANIMAL STUDIES

1) DIARRHEA

a) Silibinin and silymarin, at doses between 100 and 200 mg/kg intraperitoneally, reduced the intestinal transit time from 23% to 41% in mice. This effect was antagonized between 87% to 96% by yohimbine and between 87% and 91% by phentolamine. No change in the decreased transit time was seen when prazosin, propranolol, atropine, hexamethonium, mepyramine, cyproheptadine, and naloxone were administered (Di Carlo et al, 1993).

相關結果

[Hazard Management Information](#)

[Medical Management Information](#)

[Product Lookup - Martindale](#)

[Product Lookup - Tox & Drug](#)

出自 USP 的 MSDS

出現頭暈、嘔吐、肚痛症狀，婦人更因劇烈絞痛，小腸阻塞

Milk Thistle

簡要解答

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Adverse Effects

列印

請參閱 ['深入解答'](#) 瞭解詳細結果。

- nausea, vomiting, abdominal pain, diarrhea, sweating, weakness, collapse (one case report)
- urticaria (one case report)

相關結果

[毒理學
藥物](#)

[Index Nominum
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[Product Lookup - Martindale](#)
[Product Lookup - Tox & Drug
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Shou Ray Information Service Co., Ltd.

徵狀



主頁

藥物
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Therapeutic/ Toxic Class

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Clinical Effects

Summary Of Exposure

Neurologic

Gastrointestinal

Clinical Effects

Gastrointestinal

檢視完整文件

列印

3.8.2) CLINICAL EFFECTS

A) GASTROINTESTINAL COMPLICATION

1) WITH POISONING/EXPOSURE

a) CASE REPORT: Intermittent episodes of sweating, nausea and vomiting, colicky abdominal pain, diarrhea, weakness, and collapse occurred in a 57-year-old woman following daily administration of milk thistle capsules for 2 months. The duration of each episode was approximately 24 hours. The patient recovered spontaneously following discontinuation of the capsules; however, rechallenge with one milk thistle capsule resulted in a recurrence of symptoms (Anon, 1999).

3.8.3) ANIMAL EFFECTS

A) ANIMAL STUDIES

1) DIARRHEA

a) Silibinin and silymarin, at doses between 100 and 200 mg/kg intraperitoneally, reduced the intestinal transit time from 23% to 41% in mice. This effect was antagonized between 87% to 96% by yohimbine and between 87% and 91% by phentolamine. No change in the decreased transit time was seen when prazosin, propranolol, atropine, hexamethonium, mepyraine, cyproheptadine, and naloxone were administered (Di Carlo et al, 1993).

相關結果

替代藥物

毒理學

疾病

[Hazard Management Information](#)
[Medical Management Information](#)
[Product Lookup - Martindale](#)
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[出自 USP 的 MSDS](#)

治療的方法

Silymarin



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Silymarin

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0.4.2) ORAL/PARENTERAL EXPOSURE

A) MANAGEMENT OF MILD TO MODERATE TOXICITY

1) Silymarin overdose information is limited. Treatment is symptomatic and supportive. In patients with significant gastrointestinal symptoms (ie, nausea, vomiting or diarrhea); replace fluids as necessary. IV fluids may be indicated in patients with significant dehydration.

B) MANAGEMENT OF SEVERE TOXICITY

1) Treatment is symptomatic and supportive. Allergic reactions (ie, rash to possible anaphylaxis) are rarely reported with milk thistle exposure. For MILD to MODERATE symptoms administer antihistamines with or without inhaled beta agonists, corticosteroids or epinephrine. SEVERE: Oxygen, aggressive airway management, antihistamines, epinephrine, corticosteroids, ECG monitoring, and IV fluids.

C) DECONTAMINATION

1) PREHOSPITAL: Acute toxicity has not been reported after silymarin overdose. Gastrointestinal decontamination is generally not indicated. Activated charcoal should only be considered after very large ingestions or exposures where more toxic coingestants are involved.

相關結果

[Hazard Management Information](#)
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[Product Lookup - Martindale](#)
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低鈉鹽別亂吃 血鉀飆高恐心臟麻痺

2014年06月19日

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吃ACEI類降壓藥患者，長期吃低鈉鹽恐致心臟異常。

一名55歲王先生有高血壓，長期服用ACEI類降壓藥，王太太認為高血壓患者飲食應少鹽，因此購買低鈉鹽幫先生料理，長達半年，未料王先生回診抽血檢查發現血鉀濃度偏高，嚴重可能致心臟麻痺，所幸及時停用低鈉鹽，幫助血鉀濃度恢復正常。

鈉減半 加鉀離子

台北國泰醫院藥師蔡蕙君昨(18)日指出，市售低鈉鹽、低鈉醬油主要將鈉減半，再添加大量鉀離子，一般人吃沒事，但服用ACEI、ARB類的降血壓藥或腎功能不全患者就不適合，否則恐使血中鉀濃度升高，造成肌肉無力、心臟惡性不整甚至心臟麻痺。ACEI、ARB類藥物很多，民眾可詢問醫師外，領藥要注意藥袋是否註明副作用如高血鉀症提醒，一般領藥時藥師也會提醒。

蔡蕙君藥師解釋，ACEI、ARB類降血壓藥物，其藥理機轉會使鉀離子吸收增加，導致血鉀上升，而腎功能不全者，因腎臟代謝鉀離子功能差，高血鉀可能會使肌肉或心臟方面異常，因此這類患者皆不適合食用低鈉鹽、低鈉醬油等富含高鉀的調味料，建議採一般精鹽和醬油料理即可，並且皆應遵從醫囑，定期回診抽血檢查、監控血鉀濃度。

高鉀食物 應節制

市面上含鉀的食品越來越多，究竟有哪些藥物應該是藥師特別要注意，提醒病患用藥時多注意的呢？

全部

藥物

疾病

毒理學

搜尋藥物、疾病、毒理學及其他資訊

POTASSIUM INTERACTION



直接輸入鉀
[POTASSIUM]與交互
作用作[INTERACTION]
為關鍵字檢索



主頁 | 藥物相互作用 | IV 相容性 | 藥物鑒定 | 藥物比較 | CareNotes® | NeoFax® / Pediatrics | 其他工具 ▼

POTASSIUM [您的的搜尋： POTASSIUM]

Drug Classes: [Nutriceutical](#) | [Nutritive Agent](#) | [All](#)

Routes: [Intravenous](#) | [Oral](#) | [Sublingual](#)

POTASSIUM ▼

深入解答

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Adult Dosing

Pediatric Dosing

FDA Uses

Non-FDA Uses

Dose Adjustments

Administration

Comparative Efficacy

Place In Therapy

Medication Safety

Contraindications

Precautions

Adverse Effects

Black Box Warning

REMS

Drug Interactions (single)

IV Compatibility (single)

Drug Interactions (single)

Drug-Drug Combinations

Drug-Drug Combinations

Alacepril
Aliskiren
Amantadine
Amiloride
Atropine
Belladonna
Belladonna Alkaloids
Benazepril
Benztropine
Biperiden
Candesartan
Canrenoate
Captopril
Cilazapril
Clidinium
Dandelion
Darifenacin
Delapril
Dicyclomine
Enalaprilat
Enalapril Maleate

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Product Lookup - Martindale

Product Lookup - RED Book Online

Product Lookup - Tox & Drug

問題討論一

- 在MDX中，如何查找透析前後，藥物的調整？(以PHENYTOIN為例：一種治療「癲癇」的藥物。)

phenytoin



主頁

藥物
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比較

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Phenytoin

Drug Classes: [Antiarrhythmic](#) | [Antiarrhythmic, Group I](#) | [All](#)

Routes: **Oral**

Phenytoin ▼

簡要解答

深入解答

全部結果

dialysis



Dosing/Administration ▼

檢視文件章節

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1 / 38 results 用於 dialysis ▲ ▼

Dosage Adjustment During Dialysis

A) Hemodialysis

1) No dosage supplementation is required in patients following hemodialysis or peritoneal dialysis [74].

B) Hemofiltration

1) No dosage supplementation is required in patients undergoing continuous arteriovenous hemofiltration [74].

2) However, phenytoin removal was studied in two patients on continuous arteriovenous hemofiltration and was found to be removed proportionate to the amount of free phenytoin present in the serum. Additionally, when the ultrafiltration flow rate was high, a clinically significant amount of the drug may be removed. Thus, in patients with renal failure in whom the amount of free phenytoin may be increased, continuous arteriovenous hemofiltration at a high ultrafiltration rate may remove a clinically significant amount of the drug. Free and total serum phenytoin levels should be measured; higher daily doses may be needed [88].

Dosage in Other Disease States



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問題討論二

- 我想在MDX中查詢Ceftriaxone與腎結石和電解質異常的資料，但是只有看到年代很舊的兩篇(1996,2000年)
 - 1.MDX中不放新文獻嗎？
 - 2.我該如何再找到其他較新的資料？

輸入Adverse
Effects+藥物



主頁

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比較

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Renal Effects

Ceftriaxone Sodium

[Finding related to casts on urine microscopy](#)

[Nephrolithiasis](#)

[Nephrotoxicity](#)

[Renal failure](#)

[Serum blood urea nitrogen raised](#)

[Serum creatinine raised](#)

Finding related to casts on urine microscopy

a) Incidence: less than 1% [118]

b) Urine casts were reported in less than 1% of patients receiving ceftriaxone in clinical trials [118].

Nephrolithiasis

a) Ceftriaxone treatment of cholecystitis in a 31-year-old man resulted in the formation of 3 kidney stones. An obstructing stone was passed painlessly on micturition, and the other 2 dissipated within 5 days. Ceftriaxone precipitates in an equimolar calcium-ceftriaxone complex. Hypercalciuric patients receiving high doses of ceftriaxone may be at increased risk for nephrolithiasis [140].



140. Grasberger H, Otto B, & Loeschke K: Ceftriaxone-associated nephrolithiasis. Ann Pharmacother 2000; 34:1076-1077.

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TRUVEN HEALTH ANALYTICS
MICROMEDEX® SOLUTIONS

主頁 藥物 相互作用 IV 相容性

CEFTRIAXONE [您的的

Drug Classes: 3rd Generation Cephalosporins
Routes: Injection | Intravenous

深入解答 全部結果

Nephrolithiasis 🔍

1 / 3 results 用於 nephrolithiasis

Nephrolithiasis

a) Ceftriaxone treatment of cholecystitis in a 31-year-old man resulted in the formation of 3 kidney stones. An obstructing stone was passed painlessly on micturition, and the other 2 dissipated within 5 days. Ceftriaxone precipitates in an equimolar calcium-ceftriaxone complex. Hypercalciuric patients receiving high doses of ceftriaxone may be at increased risk for **nephrolithiasis** [140].

Nephrotoxicity

a) Death associated with calcium-ceftriaxone precipitates in the kidneys has been reported in both term and premature neonates who were given ceftriaxone and calcium-containing solutions, even when administered at different times or through separate infusion lines. Solutions or products that contain calcium must not be administered within 48 hours of ceftriaxone administration [118].

b) Renal failure was reported in 1 patient with progressively increasing BUN and serum creatinine levels; the patient died in renal failure and an unresponsive bradycardia; the investigators felt ceftriaxone was implicated [128]. In another patient, renal failure and disseminated intravascular coagulation (DIC) occurred with ceftriaxone following 3 days of treatment [129]. This patient also died; however, it is unclear if this patient is the same patient described in other reports [128].

Renal failure

a) Renal failure was reported in 1 patient with progressively increasing BUN and serum creatinine levels; the patient died in renal failure and an unresponsive bradycardia; the investigators felt ceftriaxone was implicated [128]. In another patient, renal failure and disseminated intravascular coagulation (DIC)

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Adverse Effects Ceftriaxone 🔍

Notes@ NeoFax@ / Ceftriaxone

新功能：
1.檢視完整文件
2.輸入關鍵字
Nephrolithiasis

檢視完整文件 列印

Nephrolithiasis

a) Ceftriaxone treatment of cholecystitis in a 31-year-old man resulted in the formation of 3 kidney stones. An obstructing stone was passed painlessly on micturition, and the other 2 dissipated within 5 days. Ceftriaxone precipitates in an equimolar calcium-ceftriaxone complex. Hypercalciuric patients receiving high doses of ceftriaxone may be at increased risk for **nephrolithiasis** [140].

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基本檢索

Ceftriaxone-associated nephrolithiasis

標題

檢索

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- ☐ TRANSPLANTATION (1)
- ☐ RADIOLOGY NUCLEAR MEDICINE MEDICAL IMAGING (1)
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文件類型

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- ☐ LETTER (1)

更多選項/值...

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研究領域

作者

團體作者

編輯者

來源出版品標題

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分析結果

建立引用文獻報告

- ☐ 1. **Ceftriaxone-associated nephrolithiasis and biliary pseudolithiasis**
作者: de Moor, RA; Egberts, ACG; Schroder, CH
EUROPEAN JOURNAL OF PEDIATRICS 卷: 158 期: 12 頁碼: 975-977 出版日期: DEC 1999
 [出版者提供的全文](#) [檢視摘要](#)
- ☐ 2. **Ceftriaxone associated nephrolithiasis: a prospective study in 284 children**
作者: Mohkam, Masoumeh; Karimi, Abdollah; Gharib, Atoosa; 等
PEDIATRIC NEPHROLOGY 卷: 22 期: 5 頁碼: 690-694 出版日期: MAY 2007
 [出版者提供的全文](#) [檢視摘要](#)
- ☐ 3. **CEFTRIAXONE-ASSOCIATED NEPHROLITHIASIS**
作者: COCHAT, P; COCHAT, N; JOUVENET, M; 等
NEPHROLOGY DIALYSIS TRANSPLANTATION 卷: 5 期: 11 頁碼: 974-976 出版日期: NOV 1990
 [出版者提供的全文](#)
- ☐ 4. **Ceftriaxone-associated nephrolithiasis and biliary pseudolithiasis in a child**
作者: Prince, JS; Senac, MO
PEDIATRIC RADIOLOGY 卷: 33 期: 9 頁碼: 648-651 出版日期: SEP 2003
 [出版者提供的全文](#) [檢視摘要](#)
- ☐ 5. **Ceftriaxone-associated nephrolithiasis**
作者: Grasberger, H; Otto, B; Loeschke, K
ANNALS OF PHARMACOTHERAPY 卷: 34 期: 9 頁碼: 1076-1077 出版日期: SEP 2000
 [訂購全文](#)
- ☐ 6. **Ceftriaxone-associated nephrolithiasis. Two case reports**
作者: Karliczek, SB; Doring, S; Vogt, S; 等
MONATSSCHRIFT KINDERHEILKUNDE 卷: 144 期: 7 頁碼: 702-706 出版日期: JUL 1996
 [訂購全文](#) [檢視摘要](#)
- ☐ 7. **Ceftriaxone-Associated Nephrolithiasis in Children**
作者: Fesharakinia, Azita; Ehsanbakhsh, Ali-Reza; Ghorashadizadeh, Nasrin
IRANIAN JOURNAL OF PEDIATRICS 卷: 23 期: 6 頁碼: 643-647 出版日期: DEC 2013
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問題討論三

- 如何查詢P&T Quik子庫的資料？

New Drug Approvals - 2014



主頁 藥物相互作用 IV 相容性 藥物鑒定 藥物比較 CareNotes® NeoFax® / Pediatrics 其他工具

NEW DRUG APPROVALS - 2014 MICROMEDEX NEWS

藥物諮詢

ALBIGLUTIDE

FDA-Approval Date: 04-15-2014

Tanzeum(R) is a glucagon-like peptide-1 (GLP-1) receptor agonist.

-DOSING INFORMATION: The usual dose is 30 mg subQ once weekly; may increase to 50 mg once weekly if additional glycemic control is required.

-PHARMACOKINETICS: Maximum concentrations are reached 3 to 5 days after subQ administration of 30 mg, with mean Cmax and AUC of 1.74 mcg/mL and 465 mcg x .h/mL, respectively. Exposures increase proportionally over the therapeutic dose range of 30 mg to 50 mg and achieve steady-state after 4 to 5 weeks of once-weekly administration. Injection into upper arm, abdomen, and thigh resulted in comparable exposures. Mean apparent Vd is 11 L, mean apparent clearance is 67 mL/h, and elimination half-life is approximately 5 days.

-CAUTIONS: Albiglutide is not to be used as first-line therapy for patients with inadequate glycemic control on diet and exercise, and it is not for treatment of type 1 diabetes mellitus or diabetic ketoacidosis. It is not recommended for patients with preexisting severe gastrointestinal disease and has not been evaluated in patients with a history of pancreatitis. Albiglutide has not been studied in combination with prandial insulin. It is contraindicated in patients with a personal or family history of medullary thyroid carcinoma or in patients with Multiple Endocrine Neoplasia syndrome type 2. The most commonly reported adverse events include upper respiratory tract infection, diarrhea, nausea, and injection site reaction. As albiglutide delays gastric emptying, absorption of concomitantly administered oral medications may be affected. Hypoglycemia can occur in combination with insulin secretagogues or insulin.

-FDA APPROVED INDICATIONS: Albiglutide is indicated in combination with diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

先查該年度
有哪些新藥

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Albiglutide

Drug Classes: [Antidiabetic](#) | [Endocrine-Metabolic Agent](#) | [All](#)

Routes: **Subcutaneous**

簡要解答

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Non-FDA Uses

Dose Adjustments

Administration

Comparative Efficacy

Place In Therapy

Medication Safety

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Dosing/Administration

Adult Dosing

請參閱 ['深入解答'](#) 瞭解詳細結果。

- Type 2 diabetes mellitus: initial, 30 mg SUBQ once weekly [1]
- Type 2 diabetes mellitus: missed dose, administer as soon as possible if within 3 days and resume weekly dosing; if more than 3 days have elapsed, wait until next scheduled dose [1]

列印

該藥物即會
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QUICK報告

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ALBIGLUTIDE



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Albiglutide 正考慮列入醫院處方集的相關藥物的綜述報告

P&T QUIK®



GENERIC NAME: ALBIGLUTIDE INJECTION

PROPRIETARY NAME: TANZEUM(TM)/GLAXOSMITHKLINE

FORMULARY RECOMMENDATION:

Albiglutide should be added to the formulary if the cost is competitive with other glucagon-like peptide-1 (GLP-1) receptor agonists.

FDA APPROVED INDICATIONS (1):

As an adjunct to diet and exercise to improve glycemic control in adults with type 2 diabetes mellitus.

PHARMACOLOGY (1):

Albiglutide is a recombinant fusion protein genetically fused to human albumin. It functions as a GLP-1 receptor agonist which augments glucose-dependent insulin secretion, thereby lowering fasting glucose and reducing postprandial glucose excursions. Albiglutide also delays gastric emptying.

EFFICACY (1):

SUMMARY:

Significant improvements in HbA1c and fasting plasma glucose (FPG) were demonstrated in patients with type 2 diabetes treated with albiglutide in clinical trials. Once weekly doses of 30 mg or 50 mg resulted in HbA1c decreases of 0.7% and 0.9%, respectively. For patients inadequately controlled on metformin, add-on albiglutide was significantly better than add-on sitagliptin or glimepiride, and for patients inadequately controlled on pioglitazone with or without metformin, the addition of albiglutide resulted in significant HbA1c reductions compared with placebo. For patients inadequately controlled on metformin plus glimepiride, add-on albiglutide resulted in significant reductions in HbA1c compared with placebo, however noninferiority to add-on pioglitazone was not met. Albiglutide was noninferior to basal insulin, but failed to achieve noninferiority to liraglutide in comparative trials in patients on combination therapies. Overall, weight loss of 0.4 to 1.2 kg was observed across all studies.

ALBIGLUTIDE MONOTHERAPY

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問題討論四

- 新藥開發除了在過程中需要耗費龐大的人力物力、金錢及時間外，即便產品已經通過**FDA**的核准並上市，亦有可能因上市後於人體發現不良反應而強制下架回收。例如2010年因副作用風險的評估考量下，政府下令全面下架回收的減肥藥物「諾美婷」（**Reductil**），或是因無法證實能降低敗血症死亡率，最後由廠商自行回收下市的藥物**Xigris**，都是核准上市後再離開市場的例子。

2001年FDA
核准的新藥

NEW DRUG APPROVALS - 2001 MICROMEDEX NEWS

藥物諮詢

relatively common adverse effects. Dexmethylphenidate does not appear to offer a toxicity advantage over racemic methylphenidate.

- CLINICAL APPLICATIONS: Dexmethylphenidate is indicated for the treatment of Attention Deficit Hyperactivity Disorder (ADHD) in children and adolescents (up to 17 years of age). However, it has not been shown to be more effective or safer than racemic methylphenidate.

- DROTRECIGIN ALFA

- Xigris(TM) (Eli Lilly) is a recombinant form of human activated protein C.

DOSING INFORMATION: The recommended dose for severe sepsis is an intravenous infusion of 24 micrograms/kilogram/hour (mcg/kg/hr) for 4 days.

- PHARMACOKINETICS: Plasma protease inhibitors inactivate drotrecogin alfa and endogenous activated protein C. The half-life of endogenous activated protein C is at least 15 minutes. The median clearance of drotrecogin alfa was 40 liters/hour and the median steady-state concentration was 45 nanograms/milliliter (achieved within 2 hours after the start of 12 to 30 mcg/kg/hr infusion).

- CAUTIONS: Bleeding is the main complication of therapy in sepsis patients; serious bleeding was seen in about 4% of patients in one large study. Antibodies against activated protein C have been observed.

- CLINICAL APPLICATIONS: Drotrecogin alfa is indicated for the reduction in mortality in adult patients with severe sepsis (sepsis associated with acute organ dysfunction) who have a high risk of death. Similar to endogenous activated protein C, drotrecogin alfa possesses anticoagulant, profibrinolytic, and antiinflammatory properties. A modest but statistically significant increase in 28-day survival has been reported with intravenous drotrecogin alfa in patients with sepsis accompanied by organ dysfunction.



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Sepsis syndrome, associated with a low risk of death

Sepsis syndrome, Associated with organ dysfunction and high risk of death

Sepsis syndrome, associated with a low risk of death

1) Overview

FDA Approval: Adult, no; Pediatric, no

Efficacy: Adult, Ineffective

Recommendation: Adult, Class III

Strength of Evidence: Adult, Category B

See Drug Consult reference: [RECOMMENDATION AND EVIDENCE RATINGS](#)

2) Summary:

Drotrecogin alfa was voluntarily **withdrawn from the worldwide market** on October 25, 2011 due to failure to show survival benefit in patients with severe sepsis and septic shock in the PROWESS-SHOCK study [14].

Recombinant human activated protein C should not be administered to adult patients with severe sepsis and low risk of death (typically, Acute Physiology and Chronic Health Evaluation (APACHE II) less than 20 or 1 organ failure) [1]

相關結果

毒理學

疾病

Drug Consults

Product Lookup - Martindale

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2011年全球
下架(不應該
使用於嚴重
敗血症或敗
血性休克患
者)

建議等級與證據強度

RECOMMENDATION, EVIDENCE AND EFFICACY RATINGS

RESPONSE

The Micromedex Efficacy, Strength of Evidence and Strength of Recommendation definitions are outlined below:

Table 1. Strength Of Recommendation		
Class I	Recommended	The given test or treatment has been proven to be useful, and should be performed or administered.
Class IIa	Recommended, In Most Cases	The given test, or treatment is generally considered to be useful, and is indicated in most cases.
Class IIb	Recommended, In Some Cases	The given test, or treatment may be useful, and is indicated in some, but not most, cases.
Class III	Not Recommended	The given test, or treatment is not useful, and should be avoided.
Class Indeterminate	Evidence Inconclusive	

Table 2. Strength Of Evidence	
Category A	Category A evidence is based on data derived from: Meta-analyses of randomized controlled trials with homogeneity with regard to the directions and degrees of results between individual studies. Multiple, well-done randomized clinical trials involving large numbers of patients.
Category B	Category B evidence is based on data derived from: Meta-analyses of randomized controlled trials with conflicting conclusions with regard to the directions and degrees of results between individual studies. Randomized controlled trials that involved small numbers of patients or had significant methodological flaws (e.g., bias, drop-out rate, flawed analysis, etc.). Nonrandomized studies (e.g., cohort studies, case-control studies, observational studies).
Category C	Category C evidence is based on data derived from: Expert opinion or consensus, case reports or case series.
No Evidence	

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Q & A

Thank You!

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