ACTIVE LEARNING TEMPLATE: *Medication*

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MEDICATION Amiodarone REVIEW MODULE CHAPTER

CATEGORY CLASS Class III Potassium channel blockers

PURPOSE OF MEDICATION

Expected Pharmacological Action

- Amiodarone works on electrical system of the heart by decreasing automaticity, slowing conduction through the AV node, ventricles and Purkinjie fibers, decreasing contractility, and dilating both coronary and peripheral blood vessels.

Therapeutic Use

- Manages life-threatening ventricular tachycardia or fibrillation that is
resistant to other drugs
- May treat some atrial dysrhythmias, such as atrial fibrillation

Complications

- GI symptoms; anorexia, nausea, vomiting, constipation
- ARDs, pulmonary toxicity with pneumonitis- occur most frequently with long-term and or high dose use and may lead to pulmonary fibrosis
- Dizziness, fatigue, malise, ataxia, paresthesia and corneal microdeposits
Cardiac effects; bradycardia and hypotension
-Heart failure may be worsened by amiodarone therapy
- blue grey discoloation of skin

Contraindications/Precautions

Contraindictions: Teratogenic, allergy to amiodarone or benzyl alcohol, shock, bradicardia, heart blod or sinus node dysfunction, severe hepatic disease
Precautions : Any hepatic disease, thyroid dysfunction,heart failure, electrolye imbalnce or hypovalemia, pulmonary disease, such as COPD, and heart surgery

Interactions

CYP3A4 inhibitors, including grapefruit juice, azole antifungal drugs,
erythromycin, and others increase risk for toxicity
- CYP34A inducers, such as St. John ' s wort, phenytoin, and othersdecrease blood levels
- Diuretics and drugs that increase QT interval increase risk fordysrhythmias
- Beta blockers, calcium channel blockers increase risk for bradycardia
- Amiodarone increases blood levels of quinidine, procainamide,phenytoin, digoxin, diltiazem, warfarin, and some statin drugs

Evaluation of Medication Effectiveness

- patient is in normal sinus rhythm

Medication Administration

Available for oral and IV use
- Give oral amiodarone with or without food, but at consistent times
during the day
- Infuse IV dose through central line catheter to prevent
thrombophlebitis of peripheral IV sites
- Begin oral dosing with hospitalized client
- Correct low potassium or magnesium levels before beginning therapy

Nursing Interventions

- Monitor for and report GI symptoms
- Consider reducing dose for severe GI symptoms
- test baseline chest x-ray and pulmonary function before starting therapy
- monitor pulmonary function testing results periodically
-Ausultate breath sounds and report changes or adventitious sounds
- Monitor pulse and blood pressure and report vitals signs below prescribed parameters
- Monitor cardiac rhythm constantly during infusion
- Monitor weight changes and edema for both IV and oral therapy
- Monitor for bradycardia and hypotension

Client Education

- Take with food or milk if GI symptoms occur (but be sure to take at consistent times during the day)
- Comply with chest x-ray and pulmonary function testing
Report fever, dry cough, shortness of breath or other respiratory symptoms to provider
- Report sensitivity to light and changes in vision
- Obtain regular ophthalmic checkups
- Wear sunglasses when out in sunlight
- Avoid frequent sun exposure
- Report dizziness, syncope to provider
-For oral therapy, monitor pulse rate and report rates slower than 60 beats/min to provider
- Report weight gain and edema to provider
- Be aware that skin discoloration may occur with amiodarone
- Report tremor, dizziness, hallucinations to provider-
- Avoid hazardous activity such as driving if dizziness occurs
- Due to long half-life of this drug, avoid pregnancy and breastfeeding during therapy and for several months after therapy with amiodarone s discontinued