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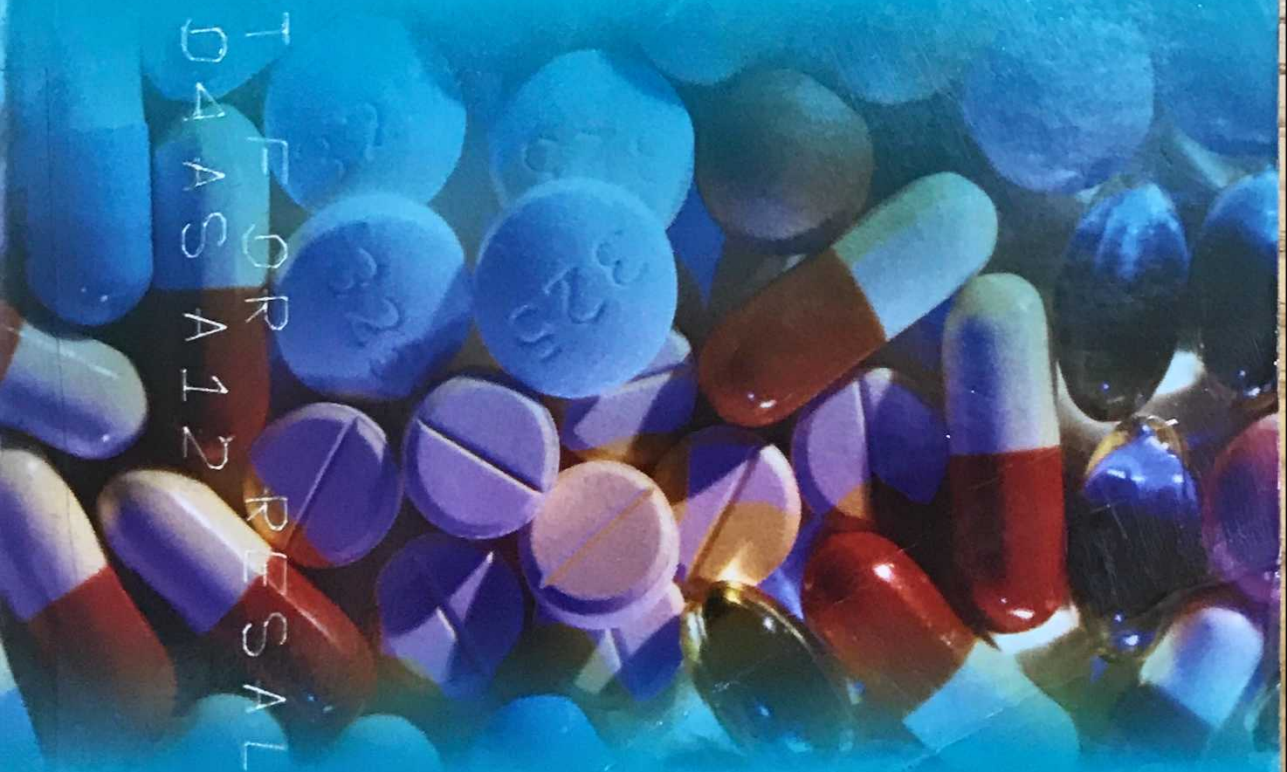
CLINICAL DRUG DATA

11th Edition



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Clinical Drug Data

eleventh edition

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Contents

How to Use This Book

Part I of this book is organized around 10 major drug categories, which have been subdivided into common therapeutic groups. Within these therapeutic groups, drug information is alphabetically presented in three formats: ***Monographs, Minimonographs,*** and ***Comparison Charts.*** Monographs and Comparison Charts are *grouped together* to ensure that related drugs are easy to *compare* and *contrast.* Charts are located after the monographs to which they relate. Drug antagonists are grouped together with agonists to simplify organization and accessibility.

Monographs are used for drugs of major importance and prototype agents.

Minimonographs are used for drugs similar to prototype drugs, those of lesser importance within a therapeutic class, and promising investigational agents. Minimonographs contain only selected subheadings of information rather than all subheadings contained in the full monographs.

Comparison Charts are used to present clinically useful information on members of the same pharmacologic class and different drugs with a similar therapeutic use, as well as to present clinically relevant information on certain other topics.

The preferred method to gain access to complete information on a *particular brand* or *generic drug* is to use the index at the end of the book. The index may also direct the user to *other pertinent information* on the drug.

MONOGRAPH FORMAT

CLASS INSTRUCTIONS

This is an optional heading at the beginning of each drug class. It consists of patient instructions that apply to more than one of the drug monographs in this subcategory. If all drugs are not identical in their instructions, only the common information is found here. The Patient Instructions section of each monograph that is affected states, *"See Class Instructions"* as the opening phrase.

GENERIC DRUG NAME Brand Name(s)

The *nonproprietary (generic)* name is listed on the left, followed by common brand names listed on the right. Brand-name products listed are not necessarily superior or preferable to other brand-name or generic products; "Various" indicates the availability of additional brand and/or generic products.

Pharmacology. A description of the chemistry, major mechanisms of action, and human pharmacology of the drug in clinical application.

Administration and Adult Dosage. Route of administration, indications, and usual adult dosage range are given for the most common labeled uses. Dosages correspond

to those in the product labeling or in standard reference sources. "Dose" refers to a single administration and "dosage" to a cumulative amount (e.g., daily dosage).

Special Populations. Dosages in patient populations other than the typical adult are listed:

Pediatric Dosage (given by age or weight range)

Geriatric Dosage (given by age range)

Other Conditions (renal failure, hepatic disease, obesity, etc.)

Dosage Forms. The most commonly used dosage forms and available strengths are listed, as well as popular combination product dosage forms. Prediluted IV piggyback or large-volume parenteral containers are not listed unless this is the only commercially available product.

Patient Instructions. Key information that should be provided to the patient when prescribing or dispensing medication is presented. When introductions apply to an entire drug category, see "Class Instructions" at the beginning of that subcategory.

Missed Doses. What the patient should do if one or more doses are missed.

Pharmacokinetics. Data are presented as the mean ± the standard deviation. Occasionally the standard error of the mean (SE) is the only information available on variability, and it is identified as such.

Onset and Duration (time course of the pharmacologic or therapeutic effect)

Serum Levels (therapeutic and toxic plasma concentrations are given)

Fate (The course of the drug in the body is traced. Pharmacokinetic parameters are generally provided as total body weight normalized values. The volume of distribution is either a V_d in a one-compartment system or V_c and $V_{d\beta}$ or V_{dss} in a two-compartment system.)

$t_{1/2}$ (terminal half-life is presented)

Adverse Reactions. Reactions known to be dose related are usually given first, then other reactions in decreasing order of frequency. Reaction frequency is classified into three ranges. However, percentages of reactions may be provided for reactions that occur more frequently than 1%.

frequent	(>1/100 patients)
occasional	(1/100 to 1/10,000 patients)
rare	(<1/10,000 patients)

Contraindications. Those listed in product labeling are given. "Hypersensitivity" is not listed as a contraindication because it is understood that patients should usually not be given a drug to which they are allergic or hypersensitive—exceptions are noted.

Precautions. Warnings for use of the drug in certain disease states and/or patient populations, together with any cross-sensitivity with other drugs. Part II, Section 2, "Drug Use in Special Populations," should be consulted for more information, particularly regarding pregnancy and breastfeeding.

Drug Interactions. The most important drug interactions are listed.

Parameters to Monitor. Important clinical signs and/or laboratory tests to monitor to ensure safe and effective use are presented. The frequency of monitoring may also be given; however, for many drugs the optimal frequency has not been determined.

Notes. Distinguishing characteristics, therapeutic usefulness, or relative efficacy of the drug are presented, as well as unique or noteworthy physicochemical properties, handling, storage, or relative cost.