## Davis drug guide pdf amlodipine besylate

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agents for initial hypertension management in accordance with current actual recommendations of hypertension; other preferred options include ACE inhibitors, angiotensin II receptor antagonists and diuretic diuretics. 501 502 503 504 1200 Although there may be individual differences in recommendations for initial selection and use of the drug in specific patient populations, Current evidence suggests that all of these classes of antihypertensive drugs tend to have a comparable effect on overall mortality and cardiovascular, cerebrovascular and renal outcomes. 501 502 503 504 1200 1213 Individualize treatment choices; take into account patient characteristics (e.g. age, ethnicity/race, comorbidities, risk of cardiovascular disease), and drug-related factors (e.g. ease of administration, accessibility, adverse effects, cost). 501 502 503 504 515 1200 1201 A 2017 ACC/AHA interdisciplinary hypertension guide BP classifies in adults at 4: category normal, Stage 2 of hypertension. 1200 (see table 1.) Source: Whelton PK, Carey RM, Aronow WS et al. 2017 ACC/AHA/AAPA/ABC/ACPM/AGS/APHA/ASPC/NMA/PCNA Guide to Prevention, Detection, Evaluation and Management of High Blood Pressure in Adults: Report by the American College of Cardiology/American Heart Association Clinical Practice Task Force. Hypertension. 2018;71:e13-115. Individuals with SBP and DBP in two different categories

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(e.g. elevated SBP and normal DBP) should be designated as, for example, in the higher BP category (i.e. increased BP). Table 1. Acc/AHA BP Classification in Adults1200 Category SBP (mm Hg) DBP (mm Hg) Normal zlt;120 and zlt;80 Elevated 120-129 and zlt;80 Hypertension. Stage 1
130-139 or 80-89 Hypertension, Stage 2 ≥140 or ≥90 The goal of managing and preventing hypertension is to achieve and maintain optimal CONTROL of BP.1200 however BP thresholds used to determine hypertension, the optimal threshold for BP, in which to initiate antihypertensive drug
therapy and ideal BP targets remain controversial.501 503 504 505 506 507 508 515 523 526 530 1200 1201 122 The 2017 ACC/AHA Hypertension Guide usually recommends BP's target (i.e. BP to achieve with drug therapy and/or non-pharmacological intervention) of zlt;130/80 mmHg.
Art. in all adults, regardless of comorbidities or atherosclerotic cardiovascular disease (ASCVD) risk.1200 In addition, the target of SBP is 130 mmHg. Art is generally recommended for non-institutualized outpatients years with average SBP ≥130 mm Hg.1200 These BP targets are based on
clinical studies demonstrating the continued reduction of cardiovascular risk at gradually lower levels of SBP.1200 1202 1210 Previous guidelines for hypertension основывали целевые цели ВР на возраст и сопутствующие заболевания.501 504 536 Руководящие
принципы, такие как те, которые выдаются JNC 8 экспертной группы, как правило, ориентированы bp <140 0= mm= hg= regardless= of= cardiovascular= risk,= and= have= used= higher= bp= thresholds= and= target= bps= in= elderly= patients501= 504= compared= with= those=
recommended= by= the= 2017= acc/aha= hypertension= guideline.1200= some= clinicians= continue= to= support= previous= target= bps= recommended= by= inc= 8= due= to= concerns= about= the= lack= of= generalizability= of= data= from= some= clinical= trials= (e.g.,= sprint=
study)= used= to= support= the= current= acc/aha= hypertension= guideline= and= potential= harms= (e.g.,= adverse= drug= effects,= costs= of= therapy)= versus= benefits= of= bp= lowering= in= patients= at= lower= risk= of= cardiovascular= disease.1222= 1223= 1224= 1229=
consider= potential= benefits= of= hypertension= management= and= drug= cost ,= adverse= effects,= and= risks= associated= with= the= use= of= multiple= antihypertensive= drugs= when= deciding= a= patient's= bp= treatment= goal.1200= 1220= 1220= 1220= for= decisions= regarding=
when= to= initiate= drug= therapy= (bp= threshold),= the= current= acc/aha= hypertension= guideline= incorporates= underlying= cardiovascular= risk= factors.1200= 1207= ascvd= risk= assessment= recommended= by= acc/aha= for= all= adults= with= hypertension.1200= acc/aha=
currently= recommend= initiation= of= antihypertensive= drug= therapy= in= addition= to= lifestyle/behavioral= modifications= at= an= sbp= \geq140= mm= hg= in= adults= who= have= no= history= of= cardiovascular= disease= (i.e.,= primary= prevention)= and= a=
low= ascvd= risk= (10-year= risk=></140&gt; &lt;10%).1200 for= secondary= prevention= in= patients= with= known= cardiovascular= disease= or= for= primary= prevention= in= those= at= higher= risk= for= ascvd= (10-year= risk= \geq10%), = acc/aha= recommend= initiation= of=
antihypertensive= drug= therapy= at= an= average= sbp= \ge 130= mm= hg= or= an= average= dbp= \ge 80= mm= hg.1200= adults= with= hypertension= and= diabetes= mellitus.= chronic= kidney= disease= (ckd).= or= age= \ge 65= vears= of= age= are= assumed= to= be= at= high= risk= for=
cardiovascular= disease;= acc/aha= state= that= such= patients= should= have= antihypertensive= drug= therapy= initiated= at= a= bp= \geq 130/80= mm= hg.1200= individualize= drug= therapy= in= patients= with= hypertension= and= underlying= cardiovascular= or= other= risk=
factors.502= 1200= in= stage= 1= hypertension,= experts= state= that= it= is= reasonable= to= initiate= drug= therapy= using= the= stepped-care= approach= in= which= one= drug= is= initiated= and= titrated= and= other= drugs= are= added= seguentially= to= achieve= the= target=
bp.1200= initiation= of= antihypertensive= therapy= with= 2= first-line= agents= from= pharmacologic's classes are recommended in adults' with a stage of 2st and 2 mm Hg. above BP goal.1200 calcium channels blockers may be preferable in hypertensive patients with certain co-existing
conditions (e.g., coronary heart disease)523 and in geriatric patients, including those with isolated systolic hypertensive patients. it is better to respond to monotherapy with calcium channel blockers or diuretic tiasid than to other classes of antihypertensive drugs
(e.g. ACE inhibitors, angiotensin II receptor antagonists).69 70 95 108 109 501 504 1200 However, the combination of ACE inhibitor or antagonist receptor angiotensin II with calcium channel blocker or diuretic thyside produces similar decreased IN black patients As in other racial
groups.1200 Amlodipine should not be used for acute treatment of hypertensive crisis.1 Adding ACE inhibitor or antagonist receptor and giotensin II can reduce the incidence of amlodipine-associated swelling.21 134 504 can use amlodipine/atorvastatin a fixed combination in the treatment
of both amlodipine (for hypertension) and atorvastatin (for dyslipidemia and cardiovascular prevention) is suitable.107 CAD Amlodipine is used to administer Primetrz. The variant of angina and chronic stable angina; 1 2 3 4 9 was used alone or in combination with other anti-anganial
agents.1 2 3 4 4 9 Calcium-channel blockers are considered drugs of choice in the management of Prinzmetal variant angina.b Amlodipine used in patients with newly documented CAD (by angography) and without cardiac arrest insufficiency or ejection of the fraction of the zlt;40% to
reduce the risk of coronary revascularization and hospitalization due to angina. 1 May use amlodipine/atorvastatin a fixed combination of the drug in the treatment of both amlodipine (for CAD) and atorvastatin (for dyslipid). Amlodipine Besylate Dosage and Administration Of General BP
Monitoring IB Monitoring BP regularly (i.e. monthly) during therapy and adjust the dosage of the antihyperative drug to BP controlled.1200 unacceptable side effects occur, discontinue the drug and initiate another antihypertensive agent from another pharmacological
class.1216 If an adequate BP response is not achieved with a single antihypertensive agent, either increase the dosage of one drug or add a second drug with demonstrated benefits and preferably an additional mechanism of action (e.g., ACE inhibitor, an angiotensin II receptor antagonist,
diuretic rhapso thiazide).1200 1216 Many patients will need at least 2 drugs from different pharmacological classes to achieve the BP goal; If BP's goal has not vet been met with 2 antihypertensive agents, add a third drug,1200 1216 Administration of Oral Administration to administer
amlodipin orally excluding meals. 1 2 3 3 5 Dosage Available as amlodipin besylate; Dosage expressed from the point of view of amlodipine. 1 Children's Patients hypertension Amlodipine Therapeutics Oral Initiate drugs at the low end of the dosage range by some experts; Can Dosage
every 2-4 weeks until BP is controlled, the maximum dosage is reached, or side effects occur.1150 Children 1-5 years old†: Some experts recommend the initial initial initial initial initial o.1 mg/kg once a day and a maximum dose of 0.6 mg/kg once a day (up to 5 mg per day).1150 Children ≥6 years:
Some experts recommend an initial dosage of 2.5 mg once a day and a maximum dosage of 10 mg once a day.1150 However, The manufacturer states the safety and efficacy of doses of zgt;5 mg daily not established in pediatric patients.1150 Manufacturer states that the usual effective
dose of amlodipine is 2.5-5 mg once a day.1 Adult Hypertension Amlodipine Oral Manufacturers condition of the usual initial dosage is 2.5-5 mg once a day.1 In small or weak individuals, Initiate therapy with 2.5 mg once a day.1 When adding amlodipine to the existing antihypertensive
regimen, use an initial dosage of 2.5 mg once a day.1 Increase in the dose of amlodipine gradually As a rule, at intervals of 7 to 14 days, until optimal control of BP (up to a maximum dose of 10 mg per day).1 May increase faster if symptoms are both warrant and patient tolerance and
response is often assessed.1 The usual dose of care is 2.5-10 mg once a day.1 1200 If there are unacceptable side effects, discontinue the drug and initiate another antihypertensive agent from a variety of pharmacological class, 1200 1216 Amlodipine /Benasepril Fixed Combination Oral
Manufacturers will say that amlodipine/benazepril fixed combination training should normally be used only after therapy with any component of the drug only failed.21 In studies using amlodipine /benazipril fixed combination in amlodiple doses .5-10 mg daily and benazepril hydrochloride 10-
40 mg daily, THE response of BP increases with an increase in the dose of amlodipine in all groups of patients and increases with an increase with an increase with an increase in the dose of benazapril in non-black groups of patients. 21 If BP is not adequately controlled by monotherapy with amlodipin (or other
dihydropyridin-derived calcium-blocker) or, can switch to amlodipine / benazepril fixed combination.21 If BP is adequately controlled monotherapy with amlodipine, but the swelling developed, can switch to amlodipine / benazep fixed combination.21 Adding benazepril to amlodipine therapy
usually does not provide additional antihypertensive effects in black patients, but benazepril seems to be Reduce the development of amlodipine-related swelling regardless of race. 21 If BP is controlled with amlodipine and benazepril (managed separately), may switch to a fixed drug
combination containing appropriate individual doses for convenience.21 Recommended initial dose of amlodipine 2.5 mg and ben Hydrochloride 10 mg once a day.21 Adjust the dosage of amlodipine/benazeprile a fixed combination according to the patient's response, up to a maximum of
amlodipine 10 mg and hydrochloride benazepril 40 mg once a day: The effect of this dose is largely achieved with 2 weeks.21 Amlodipin /Olmesartan Fixed combination Oral Oral ambrodipin/olmesartan tablets can be used for initial treatment of hypertension in patients likely to require
combination therapy with multiple antihypertensive agents to control BP.134 if the patient's base BP is 160/100 mmHg. Art., the estimated probability of achieving SBP management (SBP zlt;140 mmHg) is 48, 46, or 68%, and to achieve control DBP (DBP zlt;90 mmHg) is 51, 60, or 85%
only olmesartan medoxomil (40 mg per day), amlodipine (10 mg daily) alone, or amlodipine combined with olmesartan medoxomil (same doses), respectively.134 IF BP is not adequately controlled by monotherapy with amlodipine (or di other hydrodopiri-derived calcium channel blocker) or
olmesartan (or other antagonist of angiotensin II receptors) may switch to amlodipine/olmesartan fixed combination as a replacement for individually titered drugs.134 May switch to a fixed combination of a drug containing an individual dose of amlodipin and
olomartmesen; Alternatively, may increase the dosage of one or both components for additional antihypertensive effects. 134 Adjust the dosage of amlodipine/olmesartan fixed combination, up to a maximum of amlodipine 10 mg and olmesartan medoxomil 40 mg once a day, according to
the patient's response after \geq 2 weeks in the current dosage.134 When used for initial hypertension is likely in patients, will require a combination therapy with several antihypertensive agents, the recommended initial dose of amlodipine 5 mg and olmesartan medoxomil 20 mg once a
day.134 Can increase the dosage after 14 1-2 weeks for additional BP control, up to maximum amlodipine 10 mg once a day.134 Amlodipine/Olmesartan/Hydrochlorothiazide Fixed Combination Oral Manufacturer claims that
amlodipine/olmesartan/hydrochlormomtiaside-fixed-combination drug should not be used for initial treatment of hypertension.132 May switch to a fixed combination of amlodipine/olmesartan/hydroartsan/hydro chlorothiazide pills If BP is not adequately controlled by combination therapy with
any 2 of the following classes of drugs at the maximum tolerated, labeled, or conventional doses: calcium channel blockers, angiotensin II receptor antagonists, or diuretics.132 Patients who experience pre-limiting adverse effects of olmesartan, amlodipine, or hydrochlorothiazide when
receiving any double combination of these drugs, may switch to a triple fixed combination of a drug containing a lower dose of this component.132 May use a fixed combination as a replacement for individually titrated drugs.132 May increase the dose of this component.132 May use a fixed
combination to be individually titrated.132 May increase the drug.132 May use a fixed combination to be individually treated fixed combination after 2 weeks if additional BP control is needed (maximum amlodipine 10 mg, olmesartan medoxomil 40 mg, and hydrochlorothiazide 25 mg once a
day).132 Amlodipine/Perindoprile Fixed combination of Oral Fixed combinations of amlodipine/perindopril tablets can be used for for Treatment of hypertension in patients who may require combination therapy with multiple antihypertensive agents to control BP.130 Consider the potential
benefits and risks of starting therapy with a fixed combination, including whether the patient is likely to tolerate the lowest available dosage of combined drugs.130 If the patient's base BP is 170/105 mmHg. ст., оценочная вероятность достижения контроля SBP (SBP <140 мм рт. ст.)
составляет 26, 40, или 50% и достижения контроля DBP (DBP <90 мм рт. ст.) составляет 31, 46, или 65% с периндоприл эрбумин (16 мг ежедневно) в одиночку, амлодипин (10 мг ежедневно) в одиночку, или амлодипин (10 мг в день) в сочетании с периндоприл аргинин
(14 мг в день), соответственно.130 Если ВР не контролируется адекватно монотерапией с амлодипином (или другим дигидропиридин-производным блокатором кальциевых каналов) или периндоприлом (или другим ингибитором АПФ), может перейти на амлодипин
/периндоприл фиксированной комбинации.130 У чернокожих пациентов и пациентов с сахарным диабетом, добавление периндоприл аргинина (14 мг в день) к амлодипину (10 мг в день) не обеспечивает дополнительных антигипертензивных эффектов, помимо тех,
которые достигаются с амлодипин монотерапии. 130 Если ВР адекватно контролируется монотерапией с амлодипином but the swelling has developed, may switch to amlodipine / perindopril fixed combination to achieve control of BP without edema. 130 When used for initial
hypertension therapy in patients will probably need combination therapy with multiple antihypertensive agents, the recommended initial dose of amlodipine 2.5 mg and perindopril arginine 3.5 mg once a day.130 May adjust the dosage at intervals of 7-14 days, days, days, days to the maximum
amlod. 10 mg and perindopril arginine 14 mg once a day.130 Amlodipine/Telmisartan Fixed combination of Oral Fixed combinations of amlodipine/telmisartan tablets can be used to initial treatment of hypertension in patients It is likely to require a combination therapy with multiple
antihypertensive agents to control BP.129 Consider the potential benefits and risks of initiating therapy with a fixed combination therapy, including whether the patient is likely to tolerate the lowest available dosage of combined drugs. 129 If the patient's base BP is 160/110 mmHg. Art., the
estimated probability of achieving SBP control (SBP zlt;140 mmHg) is 46, 69, or 79%, and achieving DBP control (DBP zlt;90 mmHg) is 26, 22, 22 or 55% only with telmisartan (80 mg per day), amlodipine (10 mg per day) alone or amlodipine in combination with telmysartan (same doses),
respectively.129 If BP is not sufficiently controlled by monotherapy with amlodipin (or other dihydropyridin-derived calcium) blocker of the angiotensin II receptor), may switch to amlodipine/telmysartan fixed combination.129 If dose-limiting side effects
(e.g. swelling) developed during monotherapy with amlodipine 10 mg, may switch to a fixed combination of training training training training amlodipine 5 mg and telmisartan 40 mg to achieve similar control of BP; adjust the dosage in accordance with the patient's response after ≥2 weeks of therapy.129
You can use a fixed combination as a replacement for individually administered drugs.129 May switch to a drug with a fixed combination containing appropriate individual doses of amlodipine and telmisartan; Alternatively, may increase the dosage of one or both components for additional
antihypertensive effects.129 When used for initial hypertension therapy patients will probably need combination therapy with multiple antihypertensive agents, the usual initial dose of amlodipine 5 mg and telmisartan 80
mg once a day can be used in patients requiring large reductions in BP.129 Increase to a maximum dose of amlodipine 10 mg and telmisartan 80 mg once a day, if necessary, to control BP.129 May adjust the dosage at intervals of at least 2 weeks, Since most of the antihypertensive effect
of this dose is achieved within 2 weeks after the dose change.129 Amlodipine/Valsartan Fixed combinations of amlodipine/valsartan tablets can be used for initial treatment of hypertension in patients who may require combination therapy with Several
antihypertensive agents to control BP.113 consider the potential benefits and risks of starting therapy with a fixed combination, including whether the lowest available dosage of combined drugs.113 If the patient's base BP is 160/100 mmHg. Art., the estimated
probability of achieving SBP management (SBP zlt;140 mmHg) is 47, 67, or 80% and achieve DBP control (DBP zlt;90 mmHg. (art.) is 62, 80, or 85% only with valsartan (320 mg per day), amlodipine (10 mg per day) alone, or amlodipine combined with valsartan (same doses), respectively.
113 In studies using amlodipine/valsartan a fixed combination in doses of amlodipine 5-10 mg daily, BP's response increases with an increase in the dose of drugs.113 If BP is not adequately controlled by monotherapy with amlodipine (or another
dihydropyridin-derived calcium channel blocker) or valsartan (or another antagonist receptor angiotensin II), may switch to amlodipine /valsartan fixed combination.113 If a dose of limiting side effects developed during monotherapy, may switch to a drug with a fixed combination containing a
lower dose of this drug to achieve similar control of BP; adjust the dosage according to the patient's response after 3-4 weeks of therapy.113 If BP is controlled with and valsartan (managed separately), may switch to a fixed combination drug containing appropriate individual doses for
convenience.113 When used for initial hypertension therapy patients will probably need combination therapy with c antihypertensive agents, recommended initial dose of amlodipine 5 mg and valsartan 160 mg once a day in those who do not volume exhausted.113 Increase to maximum
dose of amlodipine 10 mg and valsartane 320 mg once a day if necessary, to control BP.113 can adjust the dosage at intervals of 1-2 weeks, as most of the antihypertensive effect of this dose is achieved within 2 weeks after the change of dosage.113
Amlodipine/Valsartan/Hydrochlorothiazide Fixed combination Of Oral Manufacturers condition amlodipin/valsartan/hydrochlorothia used for initial treatment of hypertension.133 Can switch to a fixed combination of amlodipine /valsartan / hydrochlorothiazide tablets if BP is not adequately
controlled by combination therapy with any 2 of the following drug classes: calcium channel blockers, angiotensin II receptor antagonists, or diuretic.133 In patients who experience a pre-limiting adverse effect of amlodipine, valsartan, or hydrochlorothiazide when receiving any double
combination of these drugs, may switch to a triple fixed combination of a drug containing a lower dose of this component.133 May may use a fixed combination as a substitute for individually titrated drugs.133 May increase the dosage of the fixed combination after 2 weeks if additional
control of THE IR is needed (up to maximum amodide 10 mg. valsartan 320 mg, and hydrochlorothiazide 25 mg once a day.133 Amlodipine/Atorvastatin Fixed Combination of Hypertension (Amlodipine) and Dyslipidemia and Prevention of Cardiovascular Events (Atrvastatin) Oral Use of a
Fixed Combination As a replacement for individually tited drugs. 107 May switch to a drug with a fixed combination containing appropriate individual doses of amlodipine and atorvastatin; alternatively, may increase the dosage of one or both components for additional antihypertensive and/or
antilipemical effects.107 Use a fixed combination. To provide additional therapy for patients currently receiving one component of preparation.107 Choose the initial dosage of a fixed combination based on the current dose of component being used and the recommended initial dose for
additional monotherapy.107 Use a fixed combination, To start treatment in patients in need of hypertension therapy for angina
Oral dose of amlodipine is 5-10 mg once a day; 1 2 adequate controls usually require maintaining a dosage of 10 mg daily.1 Amlodipine therapy for Angiographical therapy CAD Oral Recommended Amlo Dose of Dipine is 5-10 mg once a day; 1 adequate control
usually requires maintaining a dosage of 10 mg daily.1 Amlodipin/Atorvastatin Fixed Combination Therapy for CAD (Amlodippin) and Dyslipidemia and Cardiovascular Events (Atorvastatin) Oral Use of a fixed combination as a replacement for individually titled drugs.107 May switch to a
fixed combination drug containing appropriate individual doses of amlodipine and atorvastatin; Alternatively, may increase the dosage of one or both components for additional antianguinal and/or anti-polymetic effects. 107 Use a fixed combination to provide additional therapy for patients
currently receiving one component preparation. 107 Select initial dosage fixed combination, Based on the current dosage of the component used and the recommended initial dosage for additional monotherapy. 107 Use a fixed combination to begin treatment in patients in need of angina and
dyslipidemia therapy.10 7 Choose the initial dosage of a fixed combination based on the recommended doses of individual components.107 Appointment of the limits of infant hypertension patients Oral children 1-5 years†: Some experts recommend a maximum of 0.6 mg/kg (up to 5 mg)
daily.1150 Children ≥6 years: Manufacturer declares the safety and efficacy of amlodipine doses of ggt;5 mg daily not established.1. Some experts recommend a maximum of 10 mg daily.1150 Adult Hypertension Oral 10 mg amlodipine once a day.1 107 113 134 Special Populations Next
information addresses the dosage of amlodipine in special populations. Dosages of drugs administered in a fixed combination with amlodipine may also require adjustments in certain patient populations; the need for such dosage adjustments should be considered in the context of the
warnings, precautions and contraindications characteristic of this population and drug.21 107 113 134 hepatic hypertension disorders Initially, amlodipine 2.5 mg once a day (as an initial or add-on therapy).1 21 107 129 134 Titrat slow.1 132 Amlodipine/perindoprile fixed combination is not
recommended in patients with hepatic disorders; insufficient data to support dosage recommendations.130 Drugs, containing amlodipine in a fixed combination with olmesartan (with or without hydrochlorothiazide), telmisartan, or valsartan (with or without hydrochlorothiaazide) exceed the
recommended initial dosage of amlodipine (2.5 mg per day) for patients with hepatic insufficiency.113 129 132 133 134 Angina, Initially, Initia
Renal disorders Amlodipine dosage modification is not usually necessary. 1 2 3 3 Amlodipine / benazepril fixed combination is not recommended in patients with Clcr <30 ml/minute. 21 Amlodipine/olmesartan/hydrochlorothiazide fixed combination is not recommended for patients with Clcr
≤30 ml/minute.21 amlodipine/olmesartan/hydrochlorothiazide fixed combination is not recommended for patients with Clcr ≤30 ml/minute.21 Amlodipine/olmesartan/hydrochlorothiazide fixed combination not recommended for patients with Clcr ≤30 ml/minute. A diuretic loop is usually
preferable to hydrochlorothiazide.132 / fixed combination perindypril is not recommended in patients with Clcr zth;60 ml/minute; not enough data to support dosage recommendations.130 The safety and efficacy of drugs containing in a fixed combination with valsartan (with or without
hydrochlorothiazid) in patients with Clcr zlt;30 ml/minute is not installed.113 133 Manufacturers recommend slow-tited amlodi 129 Geriatric hypertension patients Consider lowering the initial dose of amlodipine.1 2 4 21 107 113 129 132 133 134 Some manufacturers recommend an initial
dosage of 2.5 mg once a day for geriatric patients; 1 others recommend this dose reduction for geriatric patients \geq <2> 113 132 134 Drugs containing amlodipine in a fixed combination with olmesartan (with or without hydrochlorothiazide), telmisartan, or valsartan (with or without
hydrochlorothiaside) exceed the recommended initial dosage of amlodipine (2.5 mg perday) for geriatric patients.113 129 132 133 134 Amlodipin/perindopril fixed combination is not recommended; Insufficient data available to support geriatric dosage recommendations.130 Angina
Originally, amlodipine 5 mg daily.1 107 Heart failure manufacturers do not make any specific dosage recommendations; However, amlodipine exposure in patients with moderate to severe heart failure is similar to geriatric patients and those with hepatic disorders.1 Amlodipine/perindopril
fixed combination is not recommended in patients with heart failure; Insufficient data to support dosage recommendations.130 Cautions for Amlodipine Besylate Contraindications Known hypersensitivity to amlodipine.1 21 107 Warnings/Precautionary Hypotension Possible Symptomatic
Hypotension, especially in patients with severe aortic stenosis.1 Acute hypotension is unlikely due to the gradual onset of action.1 Increase in angina and/or acute IM, especially in patients with severe abstructive CAD, when initiated or increased
dose of amlodipin.1 Use of fixed combinations When applying amlodipin in a fixed combination with other drugs (e.g. other antihypertensive agents, atorvastatin), consider cautions, Precautions, Contralincations and Interactions Associated With an Accompanying Agent (s).21 107 113 129
130 132 133 134 Consider cautionary information applicable to specific populations (e.g. pregnant or lactating women, faces with hepatic or renal disorders, geriatric patients) for each drug in a fixed combination. 21 107 113 129 130 132 133 134 Heart failure Although some calcium
channel blockers have been shown worsen the clinical condition of patients with heart failure, no evidence of worsening heart failure and no side effects on overall survival or cardiac arrest observed in controlled studies of amlodipine in patients with heart failure. 1 524 Specific Populations
Pregnancy Category C.1 Lactation Is not known whether amlodipine spreads into milk; Manufacturer recommends discontinuing care if amlodipine is used.1 Pediatric safety use and effectiveness of amlodipine's in 6 years is not established.1 The effectiveness of amlodipine 2.5-5 mg daily
for the treatment of hypertension is established in pediatric patients 6-17 years.1 Safety and effectiveness of amlodipine in a fixed combination with atorvastatin, benazepril, olmesartan (with or without hydrochlorothiazide), perindottil, telmisartan, or valsartan (with or without
hydrochlorothiazide) is not established in children.21 107 113 129 130 132 133 134 Geriatric use Increased exposure of amlodipine with caution; Amlodipine: Clinical studies included insufficient number of patients aged ≥65 years to determine whether
geriatric patients were treated differently than younger patients; other clinical experience did not reveal age-related differences in reaction or tolerance. Amlodipine in a fixed combination with benazeguirosis, olmesartan (with or without hydrochlorothiazide), telmisartan, or valsartan (with or
without hydrochlorothiazide): There are no significant differences in safety and efficacy compared to young adults, But increased sensitivity cannot be ruled out.21 113 129 132 133 134 Amlodipine in a fixed combination with perindopryl: Safety and efficacy are not established in geriatric
patients.130 Amlodipine in a fixed combination with atorvastatin: Safety and efficacy not established in geriatric patients.107 Liver disorders Increase exposure to amlodipine.1 Recommended initial dose; 1 1 1 2 2 21 107 113 129 132 133 134 titrates slowly.1 129 (see. Liver disorders in
dosage and administration and see special populations under pharmacokinetics.) Common Adverse Effects of Swelling, Dizziness, Flushing, Rapid Heartbeat, Fatique, Nausea, Abdominal Pain, Somnolence, 1 Swelling, Flushing, Rapid Heartbeat, and somnolenation may be more common
in women than men.1 Swelling may be less frequent with an accompanying ACE inhibitor or angiotensin receptor antageninin II therapy.21 134 504 Interactions for Amlodipin Besylate Next information addresses potential interactions with amlodipine. When amlodipine is used in a fixed
combination with other drugs, consider the interactions associated with the accompanying agent (s).21 107 113 129 130 132 133 134 Drugs, Influencing hepatics Microsomemal enzymes Moderate or powerful CYP3A inhibitors: Increased exposure to amlodipine.1 Reducing the dose of
amlodipine may be necessary.1 Monitor patients for symptoms of hypotension or edema.1 CYP3A inductors: Data are missing; Closely followed BP.1 Specific Drugs and Diet drugs or Food Interaction Comments Alcohol No Changes in The Effects of Alcohol1 (e.g. aluminium hydroxide and
magnesium hydroxide) No changes in amlodipine exposure 1 Antifungal drugs, azole (e.g. itrakonazole) Possible increase in exposure to amlodipine dosage may be Monitoring patients for hypotension and swelling 1 Cimetidine No effect on the effects of amlodypin 1 Digoxin No
effect on the effects of digoxin1 No changes in plasma protein binding digoxin1 Diltiazem Increased exposure to amlodipine dose reduction may be necessary; Monitoring of Patients for Hypotension and edema1 HMG-CoAA Recap inhibitors (statins) Atorvastatin: No effect on
exposure to atorvastatin1 Simvastatin: Increased exposure to simvastatin1 Simvastatin1 Simvastatin to <20 mg daily1 Grapefruit Juice Altered Amlodipin bioavastein, but there is no evidence of modified pharmacodynamics;64 65 74 75 unchanged in the effects of amlodipine
in another study1 Immunosuppressants (cyclosporin, tacrolimus) Cyclosporin: Increased concentration of cyclosporine trough1 Tacrolimus, perhaps regardless of the genotype CYP3A51 Often monitor the concentration of immunosuppressant in the blood;
adjust the dose of immunosuppressant as needed1 Indomethacin No changes in plasma protein binding indomethacin1 Macrolide (claritromycin: Possible increase in amlodipine1 Erythromycin: No significant changes in the effects of amlodipine1 Clarithromycin:
Amlodipin dose reduction may be necessary; Monitoring patients for hypotension and swelling1 phenytoin No change in plasma protein binding phenytoin is unlikely; Additional Reduction of BP Possible1 Patient Monitor for Hypotension1 Warfarin No
Changes in PT1 No changes in plasma binding of warfarin protein1 Amlodipin Besylate Pharmacokinetics Absorption Bioavailability The peak concentration of amlodipine plasma reached 6-12 hours after oral administration.1 Absolute bioavailability ranges from 64-90%1 Duration of
antihypertensive effects persist, At least 24 hours after administration.1 Food is not affected by the bioavailability of amlodipine.1 107 113 129 130 132 133 134 Distribution Extent Is not known whether amlodipin spreads in milk.1 Plasma White Binding approximately 93%. 1 Elimination
of Amlodipine Widely Metabolism (about 90%) metabolized into inactive metabolites in the liver.1 Elimination of the Amlodipine route is excreted in urine as metabolites (60%) and the constant drug (10%). 1 The period of semi-regrowth terminal period of amlodipine half-count is 30-50
hours.1 Special populations in geriatric patients, Amlodipine clearance decreased and AUC increased by about 40-60%.1 In pediatric patients with hepatic disorders, weight disorders of amlodipine clearance decreased
and AUC increased about 40-60%.1 In patients with severe moderate heart failure amlodipine clearance decreased and the AUC increased by about Stability of storage of oral tablets Amlodipine: Dense, light-resistant containers at 15-30 degrees Celsius.1 Amlodipine/perindopril,
Amlodipine/perindopril, and amlodipine/valsartan/hydrochlorothiazide fixed combinations: 25oC (may be exposed to 15-30oC); moisture protection.113 130 133 Amlodipin/atorvastatin, amlodipine/olmesartan, as well as amlodipin/olmesartan/hydrochlorothiazide fixed combinations: 25
degrees Celsius (may be exposed to 15-30 degrees Celsius).107 132 134 Amlodipine/telmisartan Fixed combination: Original packs of blister at 25oC (may be exposed to 15-30oC); Protect from light and moisture.129 Do not remove from the blister package until directly before
administration.129 Amlodipine/benazepril capsules fixed combination: A dense container at 25oC (may be exposed to 15-30oC 21 The action of Amlodipine suppresses the transmembrane flow of extracellular calcium ions through the membranes of myocardial cells and vascular smooth
cells, without altering the concentration of calcium in the serum.1 Amlodipine is a peripheral arterial vascular smooth muscle causes a decrease in peripheral vascular resistance and BP.1 Amlodipine reduces overall peripheral resistance (after load) and the
rate of product pressure and thus the demand for myocardial oxygen at any given level of exercise in patients with angina tension. Amlodipin blocks narrowing and restores blood flow in the coronary arteries in response to calcium, potassium, Epinephrine, serotonin and thrombocan A2
analogue in studies on animals and human vessels in vitro.1 Patient consultation When amplodipine is used in a fixed combination with other drugs, the importance of informing patients of important cautionary information about the concomitant substance (s).21 107 113 129 130 132 133
134 Importance not to remove amlo ddipine/telmisartan fixed combination of pills from the blister package up to just before the administration.129 The importance of informing doctors about existing or provided accompanying therapies Including prescription and over-the-counter
medications, as well as any comorbidities. The importance of women informing doctors if they are either planning to breastfeed. The importance of advising patients for other important precautionary information. (see Warnings.) Drugs exients in
commercially available drugs may have clinically important effects in some individuals; Consult with specific product labeling for details. Please contact the ASHP Drug Shortage Resource Center for information about the shortage of one or more of these drugs. amLODIPine Besylate Routes
Dosage Forms Strong Brands Manufacturer Oral Tablets 2.5 mg (Amlodipine) Amlodipine Besylate Tablet Norvasc Pfizer 5 mg (Amlodipine Besylate Tablet Norvasc Pfizer 10 mg (Amlodipine) Amlodipine Amlodipine Tablets Norvasc Pfizer - available from one or more
manufacturer, distributor, and/or repackager by generic (unsuited) name amLODIPine Besylate Combination Routes Dosage Forms Strong Names Manufacturer Oral Capsules 2.5 mg (from with Benazipril Hydrochloride 10 mg Amlodipine Besylate and Benazepril Hydrochloride Capsules
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Американское общество фармацевтов системы здравоохранения, Inc. 4500 Восток-Запад шоссе, Suite 900, Бетесда, штат Мэриленд 20814. † в настоящее время не включена в маркировку, одобренную Управлением по пищевым продуктам и лекарственным средствам
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