

### III Commonly Prescribed Medications: Generic And Selected Brand Data

**Abacavir (Ziagen) [Antiretroviral/NRTI]** **WARNING:** Allergy (fever, rash, fatigue, GI, resp) reported; lactic acidosis & hepatomegaly/steatosis reported **Uses:** \*HIV Infxn\* **Action:** Nucleoside RT inhibitor **Dose:** *Adults.* 300 mg PO bid or 600 mg PO daily *Peds.* 8 mg/kg bid **Caution:** [C, -] CDC recommends HIV-infected mothers should not breastfeed (transmission risk) **Disp:** Tabs, soln **SE:** See Warning, ↑ LFTs, fat redistribution (central obesity, peripheral wasting) **Interactions:** EtOH ↓ Drug elimination and ↑ drug exposure **EMS:** Hypersensitivity(allergic) reaction/Sxs usually appear in first 6 wks of Tx if pt is allergic **OD:** May cause N/V, lethargy, HA, BM suppression and liver failure; activated charcoal may be effective

**Abatacept (Orencia) [Immunomodulator]** **Uses:** \*Mod/severe RA w/ inadequate response to one or more DMARDs\* **Action:** Selective costimulation modulator, ↓ T-cell activation **Dose:** Initial 500 mg (<60 kg), 750 mg (60–100 kg); 1 g (>100 kg) IV over 30 min; repeat at 2 and 4 wk, then q4wk **Caution:** w/ TNF blockers [C, ?/-] COPD; Hx recurrent/localized/chronic, predisposition to Infxn **Contra:** w/ TNF antagonists (Enbrel, Remicade, Humira) (↑ Infxn) **Disp:** IV powder **SE:** HA, URI, N, nasopharyngitis, Infxn, malignancy, inf Rxns/hypersensitivity (dizziness, HA, HTN), COPD exacerbations, cough, dyspnea **Interactions:** May ↓ effective **OF** live vaccines **EMS:** May worsen COPD Sxs **OD:** Monitor for adverse Rxn; symptomatic and supportive

**Abciximab (ReoPro) [Platelet-Aggregation Inhibitor/Antiplatelet]** **Uses:** \*Prevent acute ischemic complications in PTCA\*, MI **Action:** ↓ Plt aggregation (glycoprotein IIb/IIIa inhibitor) **Dose:** *Unstable angina w/ planned PCI (ECC 2005):* 0.25 mcg/kg bolus, then 10 mcg/min cont inf × 18–24 h, stop 1 h after PCI *PCI:* 0.25 mg/kg bolus 10–60 min pre-PTCA, then 0.125 mcg/kg/min (max= 10 mcg/min) cont inf for 12 h **Caution:** [C, ?/-] **Contra:** Active or recent (w/in 6 wk) internal hemorrhage, CVA w/in 2 y or CVA w/ significant neurologic deficit, bleeding diathesis or PO anticoagulants w/in 7 d (unless PT<1.2 × control), ↓ plt (<100,000 cells/microL), recent trauma or major surgery (w/in 6 wk), CNS tumor, AVM, aneurysm, severe uncontrolled HTN, vasculitis, use of dextran prior to or during PTCA, allergy to murine proteins **Disp:** Inj **SE:** Allergic Rxns, bleeding, ↓ plt **Notes:** Use w/ heparin/ASA **Interactions:** May ↑ bleeding **W/** anticoagulants, antiplt, NSAIDs, thrombolytics **EMS:** Pt is predisposed to bleeding (internal and external) esp when combined w/ other anticoagulants, antiplt, heparin, NSAIDs, or thrombolytics; minimize or avoid invasive