

CAUTIONS, FURTHER INFORMATION Administer prophylactic NSAID (*not* aspirin or salicylates) or colchicine until at least 1 month after hyperuricaemia corrected (usually for first 3 months) to avoid precipitating an acute attack.

- **INTERACTIONS** → Appendix 1: allopurinol
- **SIDE-EFFECTS**
 - ▶ **Common or very common** Rash (discontinue therapy; if rash mild re-introduce cautiously but discontinue immediately if recurrence)
 - ▶ **Uncommon** Hypersensitivity · nausea · vomiting
 - ▶ **Rare or very rare** Agranulocytosis · alopecia · angina pectoris · angioedema · angioimmunoblastic T-cell lymphoma · aplastic anaemia · asthenia · ataxia · boil · bradycardia · cataract · coma · depression · diabetes mellitus · drowsiness · erectile dysfunction · fever · gastrointestinal disorders · gynaecostasia · haemorrhage · hair colour changes · headache · hepatic disorders · hyperlipidaemia · hypertension · infertility male · maculopathy · malaise · oedema · paraesthesia · paralysis · peripheral neuropathy · severe cutaneous adverse reactions (SCARs) · skin reactions · stomatitis · taste altered · thrombocytopenia · vertigo · visual impairment
- **PREGNANCY** Toxicity not reported. Manufacturer advises use only if no safer alternative and disease carries risk for mother or child.
- **BREAST FEEDING** Present in milk—not known to be harmful.
- **HEPATIC IMPAIRMENT** Manufacturer advises monitor liver function periodically during early stages of therapy.
Dose adjustments Manufacturer advises reduce dose.
- **RENAL IMPAIRMENT**
Dose adjustments Max. 100 mg daily, increased only if response inadequate; in severe impairment, reduce daily dose below 100 mg, or increase dose interval; if facilities available, adjust dose to maintain plasma-oxipurinol concentration below 100 micromol/litre.

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug. Forms available from special-order manufacturers include: oral suspension, oral solution

Tablet

CAUTIONARY AND ADVISORY LABELS 8, 21, 27

▶ Allopurinol (Non-proprietary)

Allopurinol 100 mg Allopurinol 100mg tablets | 28 tablet **[PoM]**
£8.15 DT = £1.11

Allopurinol 300 mg Allopurinol 300mg tablets | 28 tablet **[PoM]**
£5.85 DT = £1.62

▶ Uricto (Ennogen Pharma Ltd)

Allopurinol 100 mg Uricto 100mg tablets | 28 tablet **[PoM]** £0.78 DT = £1.11

Allopurinol 300 mg Uricto 300mg tablets | 28 tablet **[PoM]** £1.85 DT = £1.62

▶ Zyloric (Aspen Pharma Trading Ltd)

Allopurinol 100 mg Zyloric 100mg tablets | 100 tablet **[PoM]** £10.19

Allopurinol 300 mg Zyloric 300mg tablets | 28 tablet **[PoM]** £7.31
DT = £1.62

Febuxostat

18-May-2020

● INDICATIONS AND DOSE

Treatment of chronic hyperuricaemia in gout

▶ BY MOUTH

- ▶ **Adult:** Initially 80 mg once daily, if after 2–4 weeks of initial dose, serum uric acid greater than 6 mg/100 mL then increase dose; increased if necessary to 120 mg once daily

Prophylaxis and treatment of acute hyperuricaemia with initial chemotherapy for haematologic malignancies

▶ BY MOUTH

- ▶ **Adult:** 120 mg once daily, to be started 2 days before start of cytotoxic therapy and continued for 7–9 days, according to chemotherapy duration

IMPORTANT SAFETY INFORMATION

MHRA/CHM ADVICE: SERIOUS HYPERSENSITIVITY REACTIONS (JUNE 2012)

There have been rare but serious reports of hypersensitivity reactions, including Stevens-Johnson syndrome and acute anaphylactic shock with febuxostat. Patients should be advised of the signs and symptoms of severe hypersensitivity; febuxostat must be stopped immediately if these occur (early withdrawal is associated with a better prognosis), and must not be restarted in patients who have ever developed a hypersensitivity reaction to febuxostat. Most cases occur during the first month of treatment; a prior history of hypersensitivity to allopurinol and/or renal disease may indicate potential hypersensitivity to febuxostat.

MHRA/CHM ADVICE: FEBUXOSTAT (ADENURIC®): INCREASED RISK OF CARDIOVASCULAR DEATH AND ALL-CAUSE MORTALITY IN CLINICAL TRIAL IN PATIENTS WITH A HISTORY OF MAJOR CARDIOVASCULAR DISEASE (JULY 2019)

Results from the clinical study (CARES) in patients with gout and a history of major cardiovascular disease showed an increased risk of cardiovascular-related death and all-cause mortality associated with febuxostat compared with allopurinol. Healthcare professionals are advised to avoid treatment with febuxostat in patients with pre-existing major cardiovascular disease (e.g. myocardial infarction, stroke, or unstable angina), unless no other therapy options are appropriate; clinical guidelines for gout recommend treatment with febuxostat only when allopurinol is not tolerated or is contra-indicated.

- **CONTRA-INDICATIONS** Not a treatment for acute gout but continue if attack develops when already receiving febuxostat, and treat attack separately
- **CAUTIONS** Congestive heart failure · ischaemic heart disease · major cardiovascular disease · thyroid disorders · transplant recipients
- CAUTIONS, FURTHER INFORMATION** Administer prophylactic NSAID (*not* aspirin or salicylates) or colchicine for at least 6 months after starting febuxostat to avoid precipitating an acute attack.
- **INTERACTIONS** → Appendix 1: febuxostat
- **SIDE-EFFECTS**
 - ▶ **Common or very common** Diarrhoea · gout aggravated · headache · hepatic disorders · nausea · oedema · skin reactions
 - ▶ **Uncommon** Altered smell sensation · appetite abnormal · arrhythmias · arthritis · bundle branch block · chest discomfort · cholelithiasis · constipation · cough · diabetes mellitus · dizziness · drowsiness · dry mouth · dyspnoea · fatigue · gastrointestinal discomfort · gastrointestinal disorders · haemorrhage · hemiparesis · hyperlipidaemia · hypertension · increased risk of infection · insomnia · joint disorders · muscle complaints · muscle weakness · musculoskeletal pain · nephrolithiasis · palpitations · proteinuria · renal failure · sensation abnormal · sexual dysfunction · taste altered · urinary disorders · vasodilation · vomiting · weight changes
 - ▶ **Rare or very rare** Agranulocytosis · alopecia · angioedema · hyperhidrosis · hypersensitivity · musculoskeletal stiffness · nephritis tubulointerstitial · nervousness · oral ulceration · pancreatitis · pancytopenia · rhabdomyolysis · severe