

temporarily reduce maintenance dose to 5 mg and if necessary 2.5 mg daily if systolic blood pressure 100 mmHg or less during treatment; withdraw if prolonged hypotension occurs during treatment (systolic blood pressure less than 90 mmHg for more than 1 hour)

Short-term treatment following myocardial infarction in haemodynamically stable patients—systolic blood pressure 100–120 mmHg

► BY MOUTH

- Adult: Initially 2.5 mg once daily, maintenance 5 mg once daily, increase to maintenance dose only after at least 3 days of the initial dose, should not be started after myocardial infarction if systolic blood pressure less than 100 mmHg, temporarily reduce maintenance dose to 2.5 mg daily if systolic blood pressure 100 mmHg or less during treatment; withdraw if prolonged hypotension occurs (systolic blood pressure less than 90 mmHg for more than 1 hour)

Renal complications of diabetes mellitus

► BY MOUTH

- Adult: Initially 2.5–5 mg once daily, adjusted according to response; usual dose 10–20 mg once daily

Heart failure (adjunct) (under close medical supervision)

► BY MOUTH

- Adult: Initially 2.5 mg once daily; increased in steps of up to 10 mg at least every 2 weeks; maximum 35 mg per day

- **INTERACTIONS** → Appendix 1: ACE inhibitors

● **SIDE-EFFECTS**

- **Common or very common** Postural disorders
- **Uncommon** Hallucination · mood altered · Raynaud's phenomenon
- **Rare or very rare** Anaemia · autoimmune disorder · azotaemia · bone marrow depression · gynaecomastia · hepatic disorders · hypersensitivity · hypoglycaemia · lymphadenopathy · olfactory nerve disorder · SIADH · sinusitis · toxic epidermal necrolysis
- **Frequency not known** Depressive symptom · leucocytosis · vasculitis
- **BREAST FEEDING** Not recommended; alternative treatment options, with better established safety information during breast-feeding, are available.

● **RENAL IMPAIRMENT**

Dose adjustments Max. initial doses 5–10 mg daily if eGFR 30–80 mL/minute/1.73 m² (max. 40 mg daily); 2.5–5 mg daily if eGFR 10–30 mL/minute/1.73 m² (max. 40 mg daily); 2.5 mg daily if eGFR less than 10 mL/minute/1.73 m².

- **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

Oral solution

► **Lisinopril (Non-proprietary)**

Lisinopril 1 mg per 1 mL Lisinopril 5mg/5ml oral solution sugar-free | 150 mL [PoM](#) £154.11 DT = £154.11

Tablet

► **Lisinopril (Non-proprietary)**

Lisinopril 2.5 mg Lisinopril 2.5mg tablets | 28 tablet [PoM](#) £4.81 DT = £0.74 | 500 tablet [PoM](#) £11.84-£13.75

Lisinopril 5 mg Lisinopril 5mg tablets | 28 tablet [PoM](#) £7.54 DT = £0.90 | 500 tablet [PoM](#) £10.93-£16.07

Lisinopril 10 mg Lisinopril 10mg tablets | 28 tablet [PoM](#) £11.81 DT = £0.90 | 500 tablet [PoM](#) £10.78-£16.43

Lisinopril 20 mg Lisinopril 20mg tablets | 28 tablet [PoM](#) £10.42 DT = £0.95 | 500 tablet [PoM](#) £12.75-£17.86

► **Zestril (AstraZeneca UK Ltd)**

Lisinopril 5 mg Zestril 5mg tablets | 28 tablet [PoM](#) £9.42 DT = £0.90

Lisinopril 10 mg Zestril 10mg tablets | 28 tablet [PoM](#) £14.76 DT = £0.90

Lisinopril 20 mg Zestril 20mg tablets | 28 tablet [PoM](#) £13.02 DT = £0.95

Lisinopril with hydrochlorothiazide

The properties listed below are those particular to the combination only. For the properties of the components please consider, lisinopril p. 181, hydrochlorothiazide p. 178.

● **INDICATIONS AND DOSE**

Mild to moderate hypertension in patients stabilised on the individual components in the same proportions

► BY MOUTH

- Adult: (consult product literature)

- **INTERACTIONS** → Appendix 1: ACE inhibitors · thiazide diuretics

- **MEDICINAL FORMS** There can be variation in the licensing of different medicines containing the same drug.

Tablet

► **Lisinopril with hydrochlorothiazide (Non-proprietary)**

Lisinopril 10 mg, Hydrochlorothiazide 12.5 mg Lisinopril 10mg / Hydrochlorothiazide 12.5mg tablets | 28 tablet [PoM](#) £2.45 DT = £2.43

Hydrochlorothiazide 12.5 mg, Lisinopril 20 mg Lisinopril 20mg / Hydrochlorothiazide 12.5mg tablets | 28 tablet [PoM](#) £2.40 DT = £2.38

► **Zestoretic (AstraZeneca UK Ltd)**

Lisinopril 10 mg, Hydrochlorothiazide 12.5 mg Zestoretic 10 tablets | 28 tablet [PoM](#) £13.62 DT = £2.43

Hydrochlorothiazide 12.5 mg, Lisinopril 20 mg Zestoretic 20 tablets | 28 tablet [PoM](#) £13.82 DT = £2.38

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Perindopril arginine

● **INDICATIONS AND DOSE**

Hypertension

► BY MOUTH

- Adult: Initially 5 mg once daily for 1 month, dose to be taken in the morning, then, adjusted according to response; maximum 10 mg per day
- Elderly: Initially 2.5 mg once daily for 1 month, dose to be taken in the morning, then, adjusted according to response; maximum 10 mg per day

Hypertension, if used in addition to diuretic, or in cardiac decompensation or volume depletion

► BY MOUTH

- Adult: Initially 2.5 mg once daily for 1 month, dose to be taken in the morning, then, adjusted according to response; maximum 10 mg per day

Symptomatic heart failure (adjunct) (under close medical supervision)

► BY MOUTH

- Adult: Initially 2.5 mg once daily for 2 weeks, then increased if tolerated to 5 mg once daily, dose to be taken in the morning

Prophylaxis of cardiac events following myocardial infarction or revascularisation in stable coronary artery disease

► BY MOUTH

- Adult: Initially 5 mg once daily for 2 weeks, then increased if tolerated to 10 mg once daily, dose to be taken in the morning
- Elderly: Initially 2.5 mg once daily for 1 week, then increased if tolerated to 5 mg once daily for 1 week, then increased if tolerated to 10 mg once daily, dose to be taken in the morning

- **INTERACTIONS** → Appendix 1: ACE inhibitors

● **SIDE-EFFECTS**

- **Common or very common** Muscle cramps · visual impairment
- **Uncommon** Fall · hypoglycaemia · malaise · mood altered · vasculitis
- **Rare or very rare** Cholestasis