

### ● SIDE-EFFECTS

- ▶ **Common or very common** Bronchospasm · cough · gastrointestinal discomfort · headache · nausea · taste altered · vomiting
- ▶ **Frequency not known** Pharyngitis · throat irritation

**SIDE-EFFECTS, FURTHER INFORMATION** If paradoxical bronchospasm occurs, a fast-acting inhaled bronchodilator such as salbutamol or terbutaline should be used to control symptoms; treatment with nedocromil should be discontinued.

- **PREGNANCY** Inhaled drugs can be taken as normal during pregnancy.
- **BREAST FEEDING** Inhaled drugs can be taken as normal during breast-feeding.
- **TREATMENT CESSATION** Withdrawal should be done gradually over a period of one week—symptoms of asthma may recur.
- **PRESCRIBING AND DISPENSING INFORMATION** Flavours of inhalers may include mint.
- **PATIENT AND CARER ADVICE** Regular use is necessary. Patient counselling is advised for Nedocromil aerosol for inhalation (administration).

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

#### Pressurised inhalation

CAUTIONARY AND ADVISORY LABELS 8

- ▶ **Tilade** (Sanofi)

**Nedocromil sodium 2 mg per 1 dose** Tilade 2mg/dose inhaler CFC free | 112 dose [PoM] £39.94 DT = £39.94

## Sodium cromoglicate

21-May-2020

### (Sodium cromoglycate)

#### ● INDICATIONS AND DOSE

##### Prophylaxis of asthma

###### ▶ BY INHALATION OF AEROSOL

- ▶ Child 5–17 years: Initially 10 mg 4 times a day, additional dose may also be taken before exercise, increased if necessary to 10 mg 6–8 times a day; maintenance 5 mg 4 times a day, 5 mg is equivalent to 1 puff

##### Food allergy (in conjunction with dietary restriction)

###### ▶ BY MOUTH

- ▶ Child 2–13 years: Initially 100 mg 4 times a day for 2–3 weeks, then increased if necessary up to 40 mg/kg daily, then reduced according to response, to be taken before meals
- ▶ Child 14–17 years: Initially 200 mg 4 times a day for 2–3 weeks, then increased if necessary up to 40 mg/kg daily, then reduced according to response, to be taken before meals

#### IMPORTANT SAFETY INFORMATION

MHRA/CHM ADVICE: PRESSURISED METERED DOSE INHALERS (PMDI): RISK OF AIRWAY OBSTRUCTION FROM ASPIRATION OF LOOSE OBJECTS (JULY 2018)

- ▶ When used by inhalation

See Respiratory system, drug delivery p. 153.

#### ● CAUTIONS

- ▶ When used by inhalation Discontinue if eosinophilic pneumonia occurs
- **SIDE-EFFECTS**
- ▶ When used by inhalation Cough · headache · pneumonia eosinophilic · rhinitis · throat irritation
- ▶ With oral use Arthralgia · nausea · rash

**SIDE-EFFECTS, FURTHER INFORMATION** When used by inhalation, if paradoxical bronchospasm occurs, a short-

acting beta<sub>2</sub>-agonist should be used to control symptoms; treatment with sodium cromoglicate should be discontinued.

- **PREGNANCY** Not known to be harmful.
- ▶ When used by inhalation Can be taken as normal during pregnancy.
- **BREAST FEEDING** Unlikely to be present in milk.
- ▶ When used by inhalation Can be taken as normal during breast-feeding.
- **TREATMENT CESSATION**
- ▶ When used by inhalation Withdrawal of sodium cromoglicate should be done gradually over a period of one week—symptoms of asthma may recur.
- **DIRECTIONS FOR ADMINISTRATION** Capsules may be swallowed whole or the contents dissolved in hot water and diluted with cold water before taking.
- **PATIENT AND CARER ADVICE**
- ▶ With oral use Patient counselling is advised for sodium cromoglicate capsules (administration).
- ▶ When used by inhalation Patient counselling is advised for sodium cromoglicate pressurised inhalation (administration).

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

#### Capsule

CAUTIONARY AND ADVISORY LABELS 22

- ▶ **Nalcrom** (Sanofi)

**Sodium cromoglicate 100 mg** Nalcrom 100mg capsules | 100 capsule [PoM] £41.14 DT = £41.14

#### Pressurised inhalation

CAUTIONARY AND ADVISORY LABELS 8

- ▶ **Intal** (Sanofi)

**Sodium cromoglicate 5 mg per 1 dose** Intal 5mg/dose inhaler CFC free | 112 dose [PoM] £18.33 DT = £18.33

## XANTHINES

### Aminophylline

18-Mar-2020

#### ● INDICATIONS AND DOSE

##### Severe acute asthma in patients not previously treated with theophylline

###### ▶ BY SLOW INTRAVENOUS INJECTION

- ▶ Child: 5 mg/kg (max. per dose 500 mg), to be followed by intravenous infusion

##### Severe acute asthma

###### ▶ BY INTRAVENOUS INFUSION

- ▶ Child 1 month–11 years: 1 mg/kg/hour, adjusted according to plasma-theophylline concentration
- ▶ Child 12–17 years: 500–700 micrograms/kg/hour, adjusted according to plasma-theophylline concentration

##### Chronic asthma

###### ▶ BY MOUTH USING MODIFIED-RELEASE MEDICINES

- ▶ Child (body-weight 40 kg and above): Initially 225 mg twice daily for 1 week, then increased if necessary to 450 mg twice daily, adjusted according to plasma-theophylline concentration

#### DOSE ADJUSTMENTS DUE TO INTERACTIONS

- ▶ Dose adjustment may be necessary if smoking started or stopped during treatment.

#### DOSES AT EXTREMES OF BODY-WEIGHT

- ▶ To avoid excessive dosage in obese patients, dose should be calculated on the basis of ideal weight for height.