

amikacin*aminoglycoside antibacterial***Notes**

- Ototoxicity and nephrotoxicity may occur.
- Serum concentration monitoring is advisable, especially in patients with renal insufficiency and in neonates.

Renal impairment: Caution. Dosage adjustment necessary. Use 7.5 mg/kg as loading dose. Measure amikacin plasma levels and maintain under 35 mg/mL. Maintenance dose (12 hourly): divide normal dosage by serum creatinine (mmol/L).

Pregnancy: D. Use not recommended, except for severe or life-threatening infections where safer drugs are inappropriate.

Breastfeeding: May be used. Trace amounts excreted. Poor oral absorption by infant.

Common dosage range**Adult dose**

Doses listed are a guide for <48 hours' treatment. Individualise dose based on drug concentration monitoring for longer term treatment.

IM/IV, 16–24 mg/kg once daily or in 2–3 doses. Use the higher dose for young adults and the lower one for the elderly.

Paediatric dose

Child >10 years, IM/IV 18 mg/kg once daily or 15 mg/kg daily in 2–3 doses.

Child <10 years, IM/IV 22.5 mg/kg once daily or 7.5 mg/kg three times daily.

amiloride*potassium-sparing diuretic*

Cautionary advisory labels: 11, 12†, 16

Notes

- May raise serum potassium concentration.
- Caution if used in combination with ACE inhibitors, angiotensin II receptor antagonists, NSAIDs (including COX-2 inhibitors), potassium supplements, cyclosporin.

Hepatic impairment (severe): Caution. Monitor clinically.

Renal impairment: Caution. Monitor Cl_{cr} and serum electrolytes.

Pregnancy: C. Use not recommended.

Breastfeeding: Use not recommended as no data available. May suppress lactation.

Common dosage range**Adult dose**

2.5–5 mg daily as a single dose. Maximum daily dose 20 mg.

Paediatric dose

0.2 mg/kg /dose once or twice daily.

aminoglutethimide*aromatase inhibitor, antineoplastic*

Cautionary advisory labels: 1†, 16

Notes

- Should be commenced in hospital.
- Dose titrated up depending on tolerability.
- May reduce effectiveness of concomitant medications due to enzyme induction.

Renal impairment: Caution. Dosage adjustment necessary. Monitor clinically.

Pregnancy: D. Use not recommended.

Breastfeeding: Use not recommended.

Common dosage range**Adult dose**

Cushing's syndrome: 250 mg every 6 hours; maximum 2 g daily.

aminophylline*theophylline derivative bronchodilator*

Cautionary advisory labels: 5, B

Notes

- Consideration must be given to the amount of theophylline or its derivatives given in the previous 24 hours to avoid toxicity.
- Serum concentrations and response vary from one person to another; therapeutic concentrations may be achieved with considerably smaller or larger doses.
- When response is inadequate or symptoms suggest toxicity, blood concentration monitoring should be considered.
- Smokers (cigarettes or marijuana) may require larger doses.
- Many drugs influence clearance or interact.
- Each 100 mg of aminophylline is equivalent to 80 mg of theophylline.

† Most appropriate during initial treatment or when dosage is increased.