doses can also be found in Australian Prescriber at www.australianprescriber.com/upload/pdf/articles/566.pdf.

Adverse drug reactions

Medicine-related adverse effects are not comprehensively or consistently addressed in this section. Pharmacists are advised to refer to the AusDI, AMH or approved Product Information for more comprehensive details.

All health professionals are encouraged to report adverse drug reactions to the TGA Adverse Drug Reactions Unit. They also have a role in helping consumers report any adverse events they have experienced.

Reports can be submitted in the following ways:

- *Phone:* Call the Adverse Medicine Events Line on 1300 134 237. Consumer reporting can also be directed to this number.
- *Online:* Submit a report electronically at www.ebs.tga.gov.au/ebs/ADRS/ADRSRepo.nsf?OpenDatabase.
- *Using the 'Blue Card':* The forms are included with hard copies of the *ADRAC Bulletin* or can be downloaded from www.tga.gov.au/adr/bluecard.htm.

A copy of the *'Blue Card'* should also be sent to the sponsor of the product in Australia.

Monographs

abacavir

nucleoside reverse transcriptase inhibitor

Cautionary advisory labels: 12

Notes

- Report fever, nausea, vomiting, diarrhoea, rash, tiredness, difficulty in breathing, sore throat or cough.
- If hypersensitivity reactions occur, stop drug and do not rechallenge.
- Drug does not cure HIV or reduce risk of transmission.
- Should be taken in combination with other antiretrovirals.

Hepatic impairment (mild): Reduce dose to maximum of 200 mg twice daily.

Hepatic impairment (moderate–severe): Contraindicated.

Pregnancy: B3. Previously commenced therapy should be continued and advice sought from an infectious diseases specialist.

Breastfeeding: Expected to be excreted into breast milk, however there is no safety data. Breastfeeding is not recommended in women with HIV because of the risk of viral transmission to the infant.

Common dosage range

Adult dose

300 mg twice daily or 600 mg once daily.

Paediatric dose

3 months–12 years, 8 mg/kg twice daily. Maximum 600 mg daily.

acamprosate

maintains abstinence in alcohol dependence

Modification of oral formulation

Crushing or otherwise altering tablets may alter absorption characteristics.

Cautionary advisory labels: 2, A, B

Notes

- To be used in combination with psychosocial therapy.
- Avoid alcohol during treatment.
- Treatment should be maintained during relapse.
- Usual duration of therapy is 1 year.

Renal impairment: Contraindicated if Cl_{cr} <30 mL/min.

Pregnancy: B2. Use not recommended.

Breastfeeding: Use not recommended.

Common dosage range

Adult dose

Adults >60 kg, 666 mg three times daily.

Adults <60 kg, 666 mg morning, 333 mg midday, 333mg night.

acarbose

alpha-glucosidase inhibitor for diabetes

Cautionary advisory labels: B

Notes

- Gastrointestinal adverse effects include flatulence, abdominal pain and diarrhoea and are:
  - dose dependent, therefore start with low dose and gradually increase
  - generally not relieved by antacids
  - increased by consumption of sucrose.
- If therapy includes insulin or a sulfonylurea, advise patient to treat hypoglycaemic episodes with glucose rather than sucrose (cane sugar).
- Monitor transaminase concentrations 6-monthly.

Pregnancy: B3. Oral hypoglycaemic agents usually replaced with insulin.