

aspirin

analgesic, anti-inflammatory, antiplatelet, antipyretic

Modification of oral formulation

Before crushing or otherwise altering enteric-coated tablets or capsules, consider the increased risk of local gastrointestinal irritant effect.

Cautionary advisory labels: 13, A*, B

Notes

- Avoid exposing soluble aspirin tablets to air, especially when loaded into dose administration aids. Disperse all soluble preparations in water before taking.
- May be contraindicated in peptic ulcer.
- Caution if taking warfarin or other anticoagulants.
- May exacerbate heart failure or induce bronchospasm in sensitive patients. Advise accordingly.
- Use paracetamol instead of aspirin for children less than 12 years of age (see warning under dosage concerning Reye's syndrome).
- For enteric-coated preparations avoid concurrent use of antacids.
- Cease 7 days before planned surgery.
- Analgesic use:
 - Also consider topical and non-drug options—e.g. hot packs, relaxation, physiotherapy.
 - Inquire about a pain management plan.
 - Inquire if the pain relief required is for acute or chronic pain.
- Antiplatelet use:
 - If intolerant of or unable to use aspirin, consider clopidogrel as alternative.

Changes to faeces: Pink red or black colouration may indicate medicine-induced gastrointestinal bleeding.

Elderly: Gastric ulceration, sodium and water retention, exacerbation of hypertension and heart failure, renal dysfunction, tinnitus, nausea, anorexia, dizziness.

Hepatic impairment: Caution. Monitor clinically. Hypoalbuminaemia will result in salicylate toxicity (reduction in bound salicylate).

Renal impairment (moderate): Dosage adjustment necessary. Increase dose interval to 1.5–3 times normal.

Renal impairment (severe): Contraindicated when Cl_{Cr} <10 mL/min.

Pregnancy: C. Low dose may be used with caution during first and second trimester. Alternatives should be considered for analgesia. Use not recommended during third trimester.

Breastfeeding: Small amounts excreted in breast milk. Consider risk of Reye's syndrome. Occasional or low doses may be used. Avoid high or prolonged dosing especially during neonatal period. Avoid breastfeeding one to two hours after dose to minimise amount infant receives.

Common dosage range

Adult dose

Analgesic, anti-inflammatory: 300–900 mg/dose 4–6 hourly (maximum 4 g daily).

Acute rheumatism: 4–8 g daily in divided doses.

Antiplatelet activity: 75–150 mg daily (150–300 mg daily may be required in acute conditions).

Paediatric dose

Aspirin has been associated with Reye's syndrome. Avoid use for analgesia in children <12 years and in those aged 12–16 years with, or recovering from, chicken pox, influenza or fever. May be used for rheumatic fever, juvenile rheumatoid arthritis and Kawasaki's disease.

Rheumatic fever and juvenile rheumatoid arthritis: Initial 15–20 mg/kg/dose six-hourly. Maintenance 20 mg/kg/dose 4–6 hourly.

Kawasaki's disease: 10 mg/kg every eight hours until fever settles, then 3–5 mg/kg once daily.

Antiplatelet activity: 3–5 mg/kg daily.

atazanavir

antiretroviral protease inhibitor

Cautionary advisory labels: 5, B

Notes

- Rash occurs in approximately 20% of patients in the first three weeks of treatment. In most patients this resolves within two weeks while continuing treatment. If it does not, seek medical advice.
- Monitor patients on CYP3A4 substrates with narrow therapeutic index due to interaction.

Hepatic impairment (moderate): Caution. Dosage adjustment necessary. Reduce dose to 300 mg once daily.

Hepatic impairment (severe): Contraindicated.

* Some products have specific indications or specialised formulations or coatings which give rise to instructions different from those applicable generally to the conventional dose form. In cases of doubt concerning specific products with specialised formulations or coatings, reference should be made to the recommendations contained in the manufacturer's information.