

ticarcillin-clavulanate, tigecycline, tirofiban, tobramycin, tramadol, vasopressin, zidovudine

SIDE EFFECTS

CNS: *Headache*, insomnia, asthenia, fatigue, malaise, insomnia, somnolence

GI: *Diarrhea, abdominal pain*, flatulence, **pancreatitis**, weight changes, **CDAD**

INTEG: *Rash*

META: Hyperglycemia, weight gain/loss, hyponatremia, hypomagnesemia, vitamin B₁₂ deficiency

MS: Myalgia

PHARMACOKINETICS

Peak 2.4 hr, duration >24 hr, half-life 1.5 hr, protein binding 97%, eliminated in urine as metabolites and in feces; in geriatric patients, elimination rate decreased; ~~now~~ some Asian patients (15%-20%) may be poor metabolizers

INTERACTIONS

Decrease: effect of each of these drugs: protease inhibitors (atazanavir, indinavir, nelfinavir)

Increase: bleeding—warfarin

Decrease: absorption of these products—sucralfate, calcium carbonate, vit B₁₂, ketoconazole, itraconazole, atazanavir, ampicillin, iron salts, separate doses

Decrease: clopidogrel effect

Drug/Herb

Decrease: effect of pantoprazole—St. John's wort

NURSING CONSIDERATIONS

Assess:

- **CDAD:** bowel sounds; abdomen for pain, swelling; anorexia; **diarrhea with blood, mucus**
- **Hepatic studies:** AST, ALT, alk phos during treatment
- For vit B₁₂ deficiency in patients receiving long-term therapy
- **Serious skin reactions:** toxic epidermal necrolysis, Stevens-Johnson syndrome, exfoliative dermatitis; fever, sore throat, fatigue, thin ulcers; lesions in the mouth, lips

- **Electrolyte imbalances:** hyponatremia; hypomagnesemia in patients using product 3 mo to 1 year; if hypomagnesemia occurs, use of magnesium supplements may be sufficient; if severe, discontinuation of product may be required

- **Rhabdomyolysis, myalgia:** muscle pain, increased CPK; weakness, swelling of affected muscles

- **Beers:** avoid in older adults for >8 wk unless for high-risk patients; risk of *Clostridium difficile*, fractures

- **Pregnancy/breastfeeding:** use only if clearly needed; do not breastfeed

Evaluate:

- Therapeutic response: absence of epigastric pain, swelling, fullness

Teach patient/family:

- To report severe diarrhea; black, tarry stools; abdominal pain; product may have to be discontinued; do not treat diarrhea with OTC products without approval of provider (CDAD)
- That hyperglycemia may occur in diabetic patients
- To take as directed, not to skip or double dose
- To avoid alcohol, salicylates, NSAIDs; may cause GI irritation
- To continue taking even if feeling better
- To notify prescriber if pregnant or planning to become pregnant; not to breastfeed

PARoxetine (Rx)

(par-ox'e-teen)

Paxil, Paxil CR

PARoxetine mesylate

Pexeva, Brisdelle

Func. class.: Antidepressant, SSRI

Chem. class.: Phenylpiperidine derivative

Do not confuse:

PARoxetine/FLUoxetine/Piroxicam/
PACLitaxel

Paxil/PACLitaxel/Taxol/doxil

ACTION: Inhibits CNS neuron uptake of serotonin but not of norepinephrine or DOPamine