

RARELY USED**deutetrabenazine**

(du-tet-ra-BEN-a-zeen)

Austedo

USES: For the treatment of chorea associated with Huntington's disease and tardive dyskinesia

CONTRAINDICATIONS

Hypersensitivity, hepatic disease, MAOIs

Black Box Warning: Suicidal ideation**DOSAGE AND ROUTES**

- **Adult (treatment naïve; not switching from tetrabenazine):** **PO** Initially, 6 mg/day; increase at weekly intervals by increments of 6 mg/day to a max of 48 mg/day
- **Adult (switching from tetrabenazine):** **PO** Discontinue tetrabenazine and start deutetrabenazine the next day. Use 6 mg/day for patients taking tetrabenazine 12.5 mg/day

dexamethasone (Rx)

(dex-ah-meth'a-son)

Dexasone **dexamethasone sodium phosphate (Rx)***Func. class.:* Corticosteroid, synthetic*Chem. class.:* Glucocorticoid, long acting

ACTION: Decreases inflammation by suppression of migration of polymorphonuclear leukocytes, fibroblasts, reversal of increased capillary permeability and lysosomal stabilization, suppresses normal immune response, no mineralocorticoid effects

USES: Inflammation, allergies, neoplasms, cerebral edema, septic shock, collagen disorders, dexamethasone suppression test for Cushing syndrome,

adrenocortical insufficiency, TB, meningitis, acute exacerbations of MS

CONTRAINDICATIONS: Hypersensitivity to corticosteroids, sulfites, or benzyl alcohol; fungal infections, abrupt discontinuation, coagulopathy, ulcerative colitis, seizure disorders

Precautions: Pregnancy, breastfeeding, diabetes mellitus, osteoporosis, seizure disorders, ulcerative colitis, HF, myasthenia gravis, renal disease, peptic ulcer, esophagitis, recent MI, hypertension, TB, active hepatitis, psychosis, sulfite hypersensitivity, thromboembolic disorders

DOSAGE AND ROUTES**Inflammatory condition/neoplasias**

- **Adult:** **PO** 0.75-9 mg/day in divided doses q6-12hr or phosphate **IM** 0.5-9 mg/day divided q6-12hr
- **Child:** **PO** 0.024-0.34 mg/kg/day in divided doses q6-12hr

Anaphylactic shock

- **Adult:** **IV** (phosphate) single dose 1-6 mg/kg or **IV** 40 mg q2-6hr as needed up to 72 hr

Airway edema/extubation

- **Adult:** **PO/IM/IV** 0.5-2 mg/kg/day divided q6hr; use 24 hr before extubation and use for 24 hr after extubation

Chemotherapy-induced vomiting

- **Adult:** **PO/IV** 10-20 mg 15-30 min before chemotherapy or 10 mg q12hr on each treatment day
- **Child:** **IV** 5-20 mg 15-30 min before chemotherapy

Cerebral edema

- **Adult:** **IV** (phosphate) 10 mg, then 4-6 mg **IM** q6hr × 2-4 days, then taper over 1 wk
- **Child:** loading dose 1-2 mg/kg (**PO/IM/IV**), then 1-1.5 mg/kg/day, max 16 mg/day divided q4-6hr for 2-4 days, then taper down weekly

Palliative management of recurrent or inoperable brain tumors

- **Adult:** **IM/IV** 2 mg bid-tid (maintenance)
- Adrenocortical insufficiency**
- **Adult:** **PO** 0.75-9 mg/day in divided doses