

680 indomethacin

<20% unchanged in urine, 83% in feces

INTERACTIONS

• **Life-threatening dysrhythmias:** ergots, midazolam, rifAMPin, triazolam, amiodarone, pimozone, alfuzosin

Increase: myopathy—statins (atorvastatin, lovastatin, simvastatin)

Increase: indinavir levels—CYP3A4 inhibitors (arepitant, protease inhibitors, azole antifungals, nefazodone, verapamil); phosphodiesterase-5 inhibitors (sildenafil, tadalafil, vardenafil)

Increase: levels of both products—clarithromycin, zidovudine

Increase: levels of isoniazid, oral contraceptives

Decrease: indinavir levels—CYP3A4 inducers (barbiturates, carbamazepine, nonnucleoside reverse transcriptase inhibitors, phenytoins, rifamycins, modafinil)

Decrease: effect of both products—anticonvulsants

Decrease: effect—CYP3A4 substrates (calcium channel blockers, immunosuppressants, benzodiazepines, azole antifungals, macrolides, SSRIs, statins)

Drug/Herb

Decrease: indinavir levels—St. John's wort; avoid concurrent use

Drug/Food

Decrease: indinavir absorption—grapefruit juice; high-fat, high-protein foods

Drug/Lab Test

Increase: AST, ALT, amylase, total bilirubin

NURSING CONSIDERATIONS

Assess:

- Complaints of lower back, flank pain; indicates kidney stones
- Signs of infection, anemia, presence of other sexually transmitted diseases
- Blood/hepatic studies: ALT, AST; total bilirubin, amylase, blood glucose, serum cholesterol/lipid profile, may be elevated
- Plasma HIV RNA, viral load, CD4 during treatment

- Bowel pattern before, during treatment; if severe abdominal pain with bleeding occurs, product should be discontinued; monitor hydration

- Skin eruptions; rash, urticaria, itching
- Allergies before treatment, reaction of each medication; place allergies on chart

- **Pregnancy/breastfeeding:** use only if benefit outweighs fetal risk; do not breastfeed, excretion unknown

Evaluate:

- Therapeutic response: decreasing viral load, symptoms of HIV

Teach patient/family:

- To take as prescribed; if dose is missed, to take as soon as remembered up to 1 hr before next dose; not to double dose

- That product must be taken in equal intervals around the clock to maintain blood levels for duration of therapy

- **That hyperglycemia may occur; to watch for increased thirst, weight loss, hunger, and dry, itchy skin; to notify prescriber**

- To increase fluids to at least 1.5 L/day to prevent kidney stones; if stone formation occurs, that treatment may need to be interrupted

- That product does not cure HIV, only controls symptoms; not to donate blood

- That fat redistribution may occur

indomethacin (Rx)

(in-doe-meth'a-sin)

Indocin, Tivorbex

Func. class.: Nonsteroidal antiinflammatory product (NSAID), antirheumatic

Chem. class.: Acetic acid derivative

Do not confuse:

Indocin/Endocet/minocin/Vicodin

ACTION: Inhibits prostaglandin synthesis by decreasing enzyme needed for biosynthesis; analgesic, antiinflammatory, antipyretic

USES: RA, ankylosing spondylitis, osteoarthritis, bursitis, tendinitis, acute gouty arthritis; closure of patent ductus arteriosus in premature infants (IV)