may need to be decreased or discontinued if moderate to severe proteinuria occurs

- **Pregnancy/breastfeeding:** determine if the patient is pregnant or breastfeeding before using this product; may also cause infertility; do not use in pregnancy or breastfeeding

**Evaluate:**

- Therapeutic response: decreased spread of malignancy

**Teach patient/family:**

- That product will be discontinued ≥24 hr before surgery; may be resumed after adequate wound healing
- **Pregnancy/breastfeeding:** to use contraception during treatment or to avoid use of this product; to notify prescriber if pregnancy is planned or suspected; not to breastfeed
- To notify prescriber of bleeding that is severe or that requires treatment
- That laboratory testing will be required before and periodically during product use
- How to monitor B/P and that B/P products should be continued as directed by prescriber

**⚠ HIGH ALERT**

## azaCITIDine (Rx)

(a-za-sie-ti′deen)

Vidaza

*Func. class.:* Antineoplastic

*Chem. class.:* Pyrimidine nucleoside analogue

**Do not confuse:**

azaCITIDine/azaTHIOprine

**ACTION:** Cytotoxic by producing damage to double-strand DNA during DNA synthesis

**USES:** Myelodysplastic syndrome (MDS)

**Unlabeled uses:** Acute myelogenous leukemia (AML), chronic myelogenous leukemia (CML)

**CONTRAINDICATIONS:** Pregnancy, hypersensitivity to product or mannitol, advanced malignant hepatic tumors

**Precautions:** Breastfeeding, children, geriatric patients, renal/hepatic disease, baseline albumin <30 g/L; a man should not father a child while taking product

## DOSAGE AND ROUTES

- **Adult: SUBCUT/IV** 75 mg/m$^2$/day × 7 days q4wk, dose may be increased to 100 mg/m$^2$ if no response seen after 2 treatment cycles; minimum treatment, 4 cycles

**Available forms:** Powder for inj 100 mg

**Administer:**

- Use cytotoxic handling procedures

**SUBCUT route**

- **Reconstitute** with 4 mL sterile water for inj (25 mg/mL), inject diluents slowly into vial, invert vial 2-3 times, gently rotate; sol will be cloudy, use immediately; divide doses >4 mL into 2 syringes; invert contents 2-3 times, gently roll syringe between the palms for 30 sec immediately before administration, rotate inj site

**Intermittent IV INFUSION route**

- **Reconstitute** each vial with 10 mL sterile water for inj, shake well until all solids are dissolved, withdraw sol (10 mg/mL), inject in 50-100 NS or LR infusion, run over 10-40 min

## SIDE EFFECTS

**CNS:** *Anxiety, depression, dizziness, fatigue, headache, fever, insomnia*

**CV:** Cardiac murmur, hypotension, tachycardia, peripheral edema, *chest pain*

**GI:** *Diarrhea, nausea, vomiting,* anorexia, *constipation,* abdominal pain, distention, tenderness, hemorrhoids, mouth hemorrhage, tongue ulceration, stomatitis, dyspepsia, hepatotoxicity, hepatic coma

**GU:** Renal failure, renal tubular acidosis, dysuria, UTI

**HEMA:** Leukopenia, anemia, thrombocytopenia, neutropenia, febrile neutropenia, ecchymosis, petechiae

**INTEG:** *Irritation at site, rash,* sweating, pyrexia, pruritus

**META:** Hypokalemia