

Mononitrate

• **Adult: PO** (Monoket) 10-20 mg bid, 7 hr apart; (Imdur) initiate at 30-60 mg/day as a single dose, increase q3days as needed, may increase to 120 mg/day, max 240 mg/day

Available forms: **Dinitrate:** sus rel caps (SR) 40 mg, ext rel tabs 40 mg; tabs 5, 10, 20, 30, 40 mg; SL tabs 2.5, 5 mg; **mononitrate:** tabs (Monoket) 10, 20 mg; ext rel (Imdur) 30, 60, 120 mg

Administer:

- Do not break, crush, or chew sus rel caps
- After checking expiration date
- PO with 8 oz water on empty stomach
- **SUS REL cap/tab:** allow dosing interval >18 hr

SIDE EFFECTS

CNS: *Vascular headache, flushing, dizziness, weakness*

CV: *Orthostatic hypotension, tachycardia, collapse, syncope*

GI: Nausea, vomiting

INTEG: Pallor, sweating, rash

MISC: Twitching, **hemolytic anemia, methemoglobinemia**, tolerance, xerostomia

PHARMACOKINETICS**Dinitrate**

Metabolized by liver; excreted in urine as metabolites (80%-100%)

PO: Onset 15-30 min, duration 4-6 hr, half-life 5-6 hr

SUS REL: Onset ≤4 hr, duration 6-8 hr

Mononitrate

SUS REL: Onset 30-60 min, peak 1-4 hr, duration 6-8 hr, half-life 5 hr

INTERACTIONS

• **Fatal hypotension:** avanafil, sildenafil, tadalafil, vardenafil; **do not use together**

Increase: hypotension—β-blockers, diuretics, antihypertensives, alcohol, calcium channel blockers, phenothiazines

Increase: heart rate, B/P—sympathomimetics

Increase: myocardial ischemia—rosiglitazone; avoid concurrent use

NURSING CONSIDERATIONS**Assess:**

• **Anginal pain:** duration, time started, activity being performed, character

• **Methemoglobinemia (rare):** cyanosis of lips, nausea/vomiting, coma, shock; usually caused by high dose of product but may occur with normal dosing

• B/P, pulse, respirations during beginning therapy and periodically thereafter

• Tolerance if taken over long period; to prevent, allow intervals of 12-14 hr/day without product

• Headache, light-headedness, decreased B/P; may indicate a need for decreased dosage, treat headache with OTC analgesics

• **Beers:** use with caution in older adults; may exacerbate episodes of syncope

• **Pregnancy/breastfeeding:** use only if benefit outweighs fetal risk; cautious use in breastfeeding, excretion unknown

Evaluate:

• Therapeutic response: decrease or prevention of anginal pain

Teach patient/family:

• To leave tabs in original container

• To avoid alcohol, OTC products unless approved by prescriber

• That product may cause headache; that taking with meals may reduce or eliminate headache; to take no later than 7 PM (last dose)

• To avoid hazardous activities if dizziness occurs

• About the importance of complying with complete medical regimen

• To make position changes slowly to prevent orthostatic hypotension

• **Not to use with avanafil, sildenafil, tadalafil, vardenafil with nitrates; may cause serious drop in B/P**

• **Not to discontinue abruptly, may cause heart attack**

• **To use at beginning of angina symptoms, may repeat every 15 min; if no relief, seek medical attention immediately**

RARELY USED**IS**Otretinoin (Rx)

(eye-soe-tret'i-noyn)

Absorica, Amnesteem, Claravis, Myorisan, Sotret, Zenatane

Func. class.: Antiacne agent, retinoid