

Drug/Food

Increase: NIFEdipine level—grapefruit juice

Drug/Lab Test

Increase: CPK, LDH, AST

Positive: ANA, direct Coombs' test

NURSING CONSIDERATIONS**Assess:**

- **Anginal pain:** location, intensity, duration, character; alleviating, aggravating factors
- **HF:** peripheral edema, dyspnea, weight gain >5 lb, jugular venous distention, rales; monitor I&O ratios, daily weight
- Cardiac status: B/P, pulse, respiration, ECG at baseline and periodically, in those taking antihypertensives, β -blockers, monitor B/P often
- Potassium, renal, hepatic studies periodically during treatment
- For bruising, petechiae, bleeding
- **GI obstruction:** ext rel products have been associated with rare reports of obstruction in those with strictures and no known GI disease
- **Serious skin disorders:** rash that starts suddenly, fever, cutaneous lesions that may have pustules present; discontinue product if fever present or if rash is severe
- **Beers:** avoid in older adults; potential for hypotension, myocardial ischemia
- **Pregnancy/breastfeeding:** use only if benefits outweigh fetal risk; do not breastfeed

Evaluate:

- Therapeutic response: decreased anginal pain, B/P, activity tolerance

Teach patient/family:

- To avoid hazardous activities until stabilized on product, dizziness is no longer a problem
- To limit caffeine consumption; to avoid alcohol products
- To avoid OTC products unless directed by prescriber; give without regard to meals, Adalat CC should be taken on empty stomach
- That empty tab shells may appear in stools and are not significant
- **Hypertension:** to comply with all areas of medical regimen: diet, exercise, stress reduction, product therapy

- To change position slowly because orthostatic hypotension is common
- **To notify prescriber of dyspnea, edema of extremities, nausea, vomiting, severe ataxia, severe rash; changes in pattern, frequency, severity of angina**
- To increase fluid intake and fiber to prevent constipation
- To check for gingival hyperplasia and report promptly
- **Not to discontinue abruptly; to gradually taper**
- About fall risk for older adults

TREATMENT OF OVERDOSE:

Defibrillation, atropine for AV block, vasopressor for hypotension

⚠ HIGH ALERT**nilotinib (Rx)**

(nye-loe'ti-nib)

Tasigna

Func. class.: Antineoplastic—miscellaneous

Chem. class.: Protein-tyrosine kinase inhibitor

ACTION: Inhibits BCR-ABL tyrosine kinase created in patients with chronic myeloid leukemia (CML)

USES: Chronic phase/accelerated phase Philadelphia chromosome—positive CML that is resistant or intolerant to imatinib

CONTRAINDICATIONS: Pregnancy, breastfeeding, hypersensitivity

Black Box Warning: Hypokalemia, hypomagnesemia, QT prolongation

Precautions: Children, females, geriatric patients, active infections, anemia, cardiac disease, bone marrow suppression, cholestasis, diabetes, gelatin hypersensitivity, infertility, galactose-free diet, lactase deficiency, neutropenia, pancreatitis, thrombocytopenia, hepatic disease, alcoholism, angina, ascites, tumor lysis syndrome