

bacitracin topical

See Appendix B

baclofen (Rx)

(bak'loe-fen)

Gablofen, Lioresal Intrathecal*Func. class.:* Skeletal muscle relaxant, central acting*Chem. class.:* GABA chlorophenyl derivative**Do not confuse:****Lioresal/Lotensin****baclofen/Bactroban/bacitracin**

ACTION: Inhibits synaptic responses in CNS by stimulating GABA_B receptor subtype, which decreases neurotransmitter function; decreases frequency, severity of muscle spasms

USES: Spasticity with spinal cord injury, multiple sclerosis

Unlabeled uses: Neuropathic pain, trigeminal neuralgia

CONTRAINDICATIONS: Hypersensitivity, epidural, IM, IV, subcut administration

Precautions: Pregnancy, breastfeeding, geriatric patients, peptic ulcer disease, renal/hepatic disease, stroke, seizure disorder, diabetes mellitus, psychosis, abrupt discontinuation (intrathecal), CNS depressants, especially opiates

DOSAGE AND ROUTES**Spasticity in multiple sclerosis/spinal cord injury**

• **Adult/child ≥12 yr: PO** 5 mg tid × 3 days, then 10 mg tid × 3 days, then 15 mg tid × 3 days, then 20 mg tid × 3 days, then titrated to response, max 80 mg/day (20 mg qid); **INTRATHECAL** use implantable intrathecal infusion pump; use screening trial of 3 separate bolus doses if needed 24 hr apart (50 mcg, 75 mcg, 100 mcg)

• **Child <8 yr:** As above; max 60 mg/day
 • **Child >2-7 yr: PO** 10-15 mg/day divided q8hr; titrate q3days by 5-15 mg/day to max 40 mg/day

• **Child: INTRATHECAL** initial test dose same as adult; for small children, initial dose of 25 mcg/dose may be used; 25-1200 mcg/day infusion titrated to response in screening phase

Neuropathic pain including trigeminal neuralgia (unlabeled)

• **Adult: PO** 10 mg tid, may increase by 10 mg every other day; max 80 mg/day

Available forms: Tabs 5, 10, 20 mg; IT inj 10,000 mcg/20 mL, 20,000 mcg/20 mL, 40,000 mcg/20 mL; 50 mcg/mL, 0.5 mg/mL, 10 mg/20 mL, 10 mg/5 mL, 40 mg/20 mL

Administer:**PO route**

• With meals for GI symptoms
 • Store in a tight container at room temperature

IT route

For screening, dilute to a concentration of 50 mcg/mL with NaCl for inj (preservative free); give test dose over 1 min; watch for decreasing muscle tone, frequency of spasm; if inadequate, use 2 more test doses q24hr, those with inadequate response should not receive chronic IT therapy; **maintenance infusion** via implantable pump of 500-2000 mcg/mL because individual titration is required

• Do not give IT dose by inj, IV, IM, SUBCUT, epidural

Black Box Warning: Do not discontinue abruptly; may be fatal

SIDE EFFECTS

CNS: *Dizziness, weakness, fatigue, drowsiness, headache, disorientation, insomnia, paresthesias, tremors;* **seizures (IT)**

CV: Hypotension, bradycardia, flushing, edema