

ELUXADOLINE (Viberzi) **Diarrhea-predominant IBS:** 100 mg PO two times per day. Reduce dose to 75 mg PO two times per day in patients who cannot tolerate the higher dose, those with mild to moderate hepatic impairment, and patients who are receiving OATP1B1 inhibitors such as cyclosporine, alfentanil, ergotamine, fentanyl, sirolimus, tacrolimus, others. Do not use in patients who do not have a gallbladder. Avoid use with other drugs that can cause constipation. [Trade only: tabs 75, 100 mg.] ▶glucuronidation ♀?/?/? ♂? ⓄIV \$\$\$\$\$

GLYCOPYRROLATE (Robinul, Robinul Forte, Cuvposa) **Peptic ulcer disease:** 1 to 2 mg PO two to three times per day. **Chronic drooling in children (Cuvposa):** 0.02 mg/kg PO three times per day. **Preop/intraoperative respiratory antisecretory effect:** 4 mcg/kg IV 30 to 60 min before anesthesia or at the time the preanesthetic narcotic or sedative is administered. [Trade: Soln 1 mg/5 mL (480 mL, Cuvposa). Generic/Trade: Tabs 1, 2 mg.] ▶K ♀B ♂? \$\$\$\$

LACTASE (Lactaid) Swallow or chew 3 caplets (Original-strength), 2 tabs/caplets (Extra-strength), 1 caplet (Ultra) with first bite of dairy foods. Adjust dose based on response. [OTC Generic/Trade: Caplets.] ▶Not absorbed ♀+ ♂+ \$

LIBRAX (chlordiazepoxide—clidinium) **Control emotional and somatic factors in GI disease, adjunct in peptic ulcer, irritable bowel syndrome, acute enterocolitis:** 1 to 2 caps PO three to four times per day. [Generic: Caps, chlordiazepoxide 5 mg + clidinium 2.5 mg.] ▶K Ⓞ ♀D ♂— \$\$\$\$\$ ■

LINACLOTIDE (Linzess, *Constella) **Irritable bowel syndrome with constipation:** 290 mcg PO once daily. **Chronic idiopathic constipation:** 145 mcg or 72 mcg PO once daily, based on presentation and tolerability. Contraindicated in children 6 yo or younger. [Trade: Caps 72, 145, 290 mcg.] ▶gut ♀C ♂? \$\$\$\$\$ ■

LORCASERIN (Belviq, Belviq XR) **Obesity or overweight with comorbidities:** 10 mg PO two times per day or 20 mg (extended-release) PO once daily. [Trade: Tabs 10 mg. Extended-release tab 20 mg.] ▶L Ⓞ ♀X ♂— ⓄIV \$\$\$\$\$

METHYLNALTREXONE (Relistor) **Opioid-induced constipation with chronic non-cancer pain:** 12 mcg SC once daily or 450 mg PO once daily in the morning. **Opioid induced constipation in patients with advanced illness:** Less than 38 kg: 0.15 mg/kg SC every other day; 38 kg to 61 kg: 8 mg SC every other day; 62 kg to 114 kg: 12 mg SC every other day; 115 kg or greater: 0.15 mg/kg SC every other day. [Trade only: Single-use vial 12 mg/0.6 mL soln for SC injection; single-use prefilled syringe 8 mg/0.4 mL and 12 mg/0.6 mL soln for SC injection. Tabs 150 mg.] ▶unchanged Ⓞ ♀B ♂— \$\$\$\$\$

NALDEMEDINE (Symproic) **Opioid-induced constipation in chronic non-cancer pain:** 0.2 mg PO once daily. Discontinue if treatment with the opioid is discontinued. [Trade, Rx: Tab 0.2 mg.] ▶♀?/?/? ♂— \$\$\$\$\$

NALOXEGOL (Movantik) **Opioid-induced constipation:** 25 mg PO once daily; if not tolerated, reduce dose to 12.5 mg. Reduce dose in CrCl < 60 mL/min. [Trade only: Tabs 12.5, 25 mg.] ▶L Ⓞ ♀C May produce opioid withdrawal in fetus. ♂— May precipitate opioid withdrawal in fetus. \$\$\$\$\$

NEOMYCIN—ORAL (Neo-Fradin) **Hepatic encephalopathy:** 4 to 12 g/day PO divided q 4 to 6 h. Peds: 50 to 100 mg/kg/day PO divided q 6 to 8 h. [Generic: Tabs 500 mg. Generic: Soln 125 mg/5 mL] ▶Minimal absorption Ⓞ ♀D ♂? \$\$\$