# **AMLODIPINE**

Class: Antianginal Agent; Calcium Channel Blocker, Dihydropyridine

Indications: Treatment of hypertension; treatment of symptomatic chronic stable angina, vasospastic (Prinzmetal's) angina (confirmed or suspected); prevention of hospitalization due to angina with documented CAD (limited to patients without heart failure or ejection fraction <40%)

#### Dosage:

**-Hypertension:** Oral: Initial dose: 5 mg once daily; maximum dose: 10 mg once daily. In general, titrate in 2.5 mg increments over 7-14 days. Usual dosage range (JNC 7): 2.5-10 mg once daily.

-Angina: Oral: Usual dose: 5-10 mg; most patients require 10 mg for adequate effect.

# **Dosing: Geriatric**

Dosing should start at the lower end of dosing range and titrated to response due to possible increased incidence of hepatic, renal, or cardiac impairment. Elderly patients also show decreased clearance of amlodipine.

**Hypertension:** Oral: 2.5 mg once daily

**Angina:** Oral: 5 mg once daily

## **Renal Impairment:**

Dialysis: Hemodialysis and peritoneal dialysis do not enhance elimination. Supplemental dose is not necessary.

#### **Hepatic Impairment:**

- Hypertension: Administer 2.5 mg once daily

-Angina: Administer 5 mg once daily

Available dosage form in the hospital: 5MG TAB, 10MG CAP.

## Common side effect:

>10%: Cardiovascular: Peripheral edema (2% to 11% dose related; female 15%; male 6%; HF patients 27% [Packer, 1996])

Respiratory: Pulmonary edema (HF patients 27% [Packer, 1996])

1% to 10%: Cardiovascular: Palpitations (1% to 5% dose related), flushing (1% to 3% dose related, more frequent in females). Central nervous system: Fatigue (5%), dizziness (1% to 3% dose related), somnolence (1%)

Dermatologic: Pruritus (1% to 2%), rash (1% to 2%). Endocrine & metabolic: Male sexual dysfunction (1% to 2%). Gastrointestinal: Nausea (3%), abdominal pain (2%)

Neuromuscular & skeletal: Muscle cramps (1% to 2%), weakness (1% to 2%)

Respiratory: Dyspnea (1% to 2%)

**Pregnancy Risk Factor: C**