

Nifedipine

【OATAN】Atanaal® Capsule 5mg/Soft Cap

ATC Code : C08CA05

中文名：壓達能軟膠囊 5 毫克 «曼哈頓企業»

【OADAL3】Nifedipine® S.R.F.C. 30mg/Tab

ATC Code : C08CA05

中文名：恆脈循持續性膜衣錠 «中化»

適應症：狹心症、高血壓。

藥理分類：Antianginal; Antihypertensive; Calcium Channel Blocker, dihydropyridine.

用法用量：Administration: swallowed whole with a little liquid, independently of meals.

Indications and dosage regimens:

Stable angina, chronic:

— Atanaal®: Initial, 10 mg TID; maintenance, 10-30 mg TID~QID;

MAX, 180 mg/day.

— Nifedipine S.R.F.C.®: Initial 30 or 60 mg QD; MAX, 120 mg/day.

Hypertension:

— Atanaal®:

Not recommended, because of concerns about potential cardiovascular risks.

— Nifedipine® S.R.F.C.:

Initially, 30 or 60 mg QD. Maintenance dosage: 30-60 mg QD. MAX 120 mg QD.

Hypertensive emergency in pregnancy or postpartum (including acute-onset hypertension in preeclampsia/eclampsia) (off-label use):

— Atanaal Capsule® : . BP: blood pressure

Note: Generally reserved for use when IV access is not available. Some experts **avoid use** of IR formulations as it may be associated with precipitous drops in BP in some women. **Do not** puncture capsule or administer sublingually.

- Initial: 10 mg once; if systolic or diastolic BP remains above target at 20 minutes, give a **second** dose of 10 or 20 mg orally depending on initial response. Reassess BP again 20 minutes after the second dose; if not at target, give a **third** dose of 10 or 20 mg depending on previous response.
- If target BP is not achieved 20 minutes after the third dose, another class of agents should be considered; maximum cumulative dose: 50 mg/treatment episode or 180 mg/day.

— Nifedipine S.R.F.C.® :

- Initial: 30 mg; repeat 30 mg after 1 to 2 hours if target blood pressure is not achieved;
- If systolic or diastolic blood pressure remains above threshold after the second dose, another class of agents should be considered.

Raynaud's Syndrome:

Atanaal® :10mg TID, can be increased to 30mg TID. **Short-term** and monitor closely.

Nifedipine® S.R.F.C.: Initially, 30mg QD, usual effective dose: 30 to 120 mg/day.

不良反應：頭痛、頭昏、潮紅、水腫、牙齦增生、心悸等。

交互作用：

- Cytochrome P450 3A4 系統誘導劑，會降低 nifedipine 生體可用率而減弱其效果：例如 Rifampicin、phenytoin、carbamazepine 和 phenobarbitone。

- Cytochrome P450 3A4 系統**抑制劑**可能會導致 nifedipine 血中濃度增加的藥物：如，erythromycin、ritonavir、ketoconazole、fluoxetine、Valproic acid、Cimetidine、Cisapride。
- **Grapefruit Juice**：↑ the serum concentration of NIFedipine.

注意事項：

- 1、本劑禁用於心臟血管性休克之患者。
- 2、Nifedipine[®] S.R.F.C. 為長效製劑，不可磨粉使用。
- 3、Nifedipine[®] S.R.F.C. 是將藥物包在不能被消化的殼中，到體內後再慢慢釋出，當此一過程完成後，空殼會自糞便中排出。
- 4、Nifedipine[®] S.R.F.C. 所含的主成分對光敏感，且為避免吸潮，最好在服用時才由包裝內取出 Nifedipine[®] S.R.F.C. 並且立即服用。
- 5、勿與葡萄柚汁併服。(可能抑制代謝，增強降壓效果)
- 6、下列病患不適用 Nifedipine[®] S.R.F.C.：有 Kock 憩室(直腸與結腸切除後的迴腸造口術)、腸胃道阻塞、食道阻塞或腸胃道管腔直徑縮短病史、Crohn's disease。

懷 孕 期： 須謹慎評估。會通過胎盤，曾有造成胎兒生長遲滯、早產報告。

授 乳 期： 會分泌至乳汁中，如果哺乳期間母親非用 Nifedipine 不可，就必須停止哺乳。