Dexamethasone phosphate

IDEADexamethasone 4mg/1mL/AmpATC Code : H02AB02IDEAMDexamethasone 4mg/1mL/AmpATC Code : H02AB02

中文名: 利解漏注射液 《南光》

適應症: 支氣管氣喘、風濕性關節炎、重症皮膚疾患、火傷、咽喉炎、蕁麻疹、中耳炎。

Dexamethasone

[ODEXA] Decone 0.5 mg/Tab ATC Code : H02AB02

中文名: 得康錠 《杏輝》

適應症: 氣喘、蕁麻疹、灼傷、風濕性關節炎、支氣管氣喘、皮膚炎。

藥理分類: Corticosteroid, Systemic; Anti-inflammatory Agent; Antiemetic. 用法用量: Administration: Tablet-- orally with food to reduce GI intolerance.

Injection—Intra-articular or soft tissue injection, IM or IV

Indications and dosage regimens:

Adult

Anti-inflammatory:

Oral, IM, IV: 0.75-9 mg/day in divided doses every 6-12 hours Intra-articular, intralesional, or soft tissue: 0.2 to 6 mg once every 3 to 5 days to once every 2 to 3 weeks.

Extubation or airway edema:

Oral, IM, IV: 0.5-2 mg/kg/day in divided doses every 6 hours beginning 24 hours prior to extubation and continuing for 4-6 doses afterwards

Antiemetic:

 Prophylaxis: Oral, IV: 10-20 mg 15-30 minutes before treatment on each treatment day.

Continuous infusion regimen: Oral or IV: 10 mg every 12 hours on each treatment day.

- -Mildly emetogenic therapy: Oral, IM, IV: 4 mg every 4-6 hours
- —Delayed nausea/vomiting:

Oral: 4-10 mg 1-2 times/day for 2-4 days or 8 mg every 12 hours for 2 days; then 4 mg every 12 hours for 2 days or 20 mg 1 hour before chemotherapy; then 10 mg 12 hours after chemotherapy; then 8 mg every 12 hours for 4 doses; then 4 mg every 12 hours for 4 doses.

Multiple myeloma:

Oral, IV: 40 mg/day, days 1 to 4, 9 to 12, and 17 to 20, repeated every 4 weeks (alone or as part of a regimen)

Cerebral edema:

IV: 10 mg stat, 4 mg IM/IV (should be given as sodium phosphate) every 6 hours until response is maximized, then switch to oral regimen, then taper off if appropriate; dosage may be reduced after 2-4 days and gradually discontinued over 5-7 days

Hypercortisolism; diagnosis:

-Cushing's syndrome:

PO, 1 mg is given at 11 pm. Blood is drawn for plasma cortisol determinations at 8 am the following morning. Greater accuracy can be achieved by administering dexamethasone 0.5 mg every 6 hrs for 48 hrs. 24-hour urine collections are made for determination of 17-hydroxycorticosteroid (17-OHCS) excretion.

-Distinguishing Cushing's syndrome due to pituitary ACTH excess from

Cushing's syndrome due to other causes:

PO, Dexamethasone 2 mg every 6 hrs for 48 hrs, and then 24- hr urine collections are made for determinations of 17-OHCS excretion.

Pediatric

Antiemetic (prior to chemotherapy):

Refer to individual protocols and emetogenic potential: IV: 10 mg/m²/dose every 12-24 hours on days of chemotherapy for severely emetogenic chemotherapy courses

Anti-inflammatory and/or immunosuppressant:

Oral, IM, IV: 0.08-0.3 mg/kg/day or 2.5-10 mg/m²/day in divided doses every 6-12 hours

Extubation or airway edema:

Oral, IM, IV: 0.5-2 mg/kg/day in divided doses every 6 hours beginning 24 hours prior to extubation and continuing for 4-6 doses afterwards

Cerebral edema: IV:

Loading dose: 1-2 mg/kg/dose as a single dose; maintenance: 1-1.5 mg/kg/day (maximum: 16 mg/day) in divided doses every 4-6 hours, taper off over 1-6 weeks

不良反應: 腸胃不適,情緒變化,食欲增加,水腫,肌肉痛,視力模糊,骨質疏鬆,毛髮 增加等。

禁 忌: 全身性黴菌感染(補充腎上腺皮質功能不全者除外)或對本成分過敏者。

注意事項: 1.本劑使用時有和其他副腎皮質荷爾蒙共同所見之 moonface 及稀有之輕度多毛症及一些過敏性症狀,但此於停藥或減量後立可消失。

- 2.長期使用本劑後,如欲中止使用時切勿急速中止,而以漸次減量後才予停藥。
- 3.急慢性感染症,使用時請同時併用適當的化學療法。
- 4.對消化管障碍如胃腸瘍患者,務請特別注意。
- 5.因主要副作用為引起浮腫,血壓上升,尤以腎臟疾患及高血壓患者應注意。
- 6.糖尿病患者使用時請注意增加 Insulin 之用量的必要。
- 7.對於有精神病因素者多加注意。
- 8.服用本劑期間充分補充蛋白質。

懷 孕 期: 須衡量用藥之潛在利益及對母體或胎兒可能傷害。

授 乳 期: 皮質類固醇可分泌至乳汁,壓抑嬰兒生長、干擾內生性皮質類固醇的合成及引起其他副作用,故服藥期間禁止哺乳。

triamcinolone 4 mg, prednisolone and prednisone 5 mg, hydrocortisone 20 mg, or cortisone 25 mg.