Update date: February 1, 2024

Group No. 1: Analgesia

ACETYLSALICYLIC ACID

Description	Indications	Route of administration and dosage
TABLET	Rheumatoid arthritis.	Oral.
Each tablet contains:	Osteoarthritis.	Adults:
Acetylsalicylic acid 500 mg.		
Package with 20 tablets.	Ankylosing spondylitis.	Pain or fever: 250-500 mg every 4 hours.
SOLUBLE TABLET OR	Acute rheumatic fever.	Arthritis: 500-1000 mg every 4 or 6 hours.
EFFERVESCENT	Pain or fever.	Children:
Each soluble or effervescent		
tablet contains:		Pain or fever: 30-65 mg/kg body weight/day, dividing dose
Acetylsalicylic acid 300 mg.		every 6 or 8 hours.
Package with 20 soluble or effervescent		
tablets.		Rheumatic fever: 65 mg/kg body weight/day, divided dose every 6 or 8 hours.
	TABLET Each tablet contains: Acetylsalicylic acid 500 mg. Package with 20 tablets. SOLUBLE TABLET OR EFFERVESCENT Each soluble or effervescent tablet contains: Acetylsalicylic acid 300 mg. Package with 20 soluble or effervescent	TABLET Each tablet contains: Acetylsalicylic acid 500 mg. Package with 20 tablets. SOLUBLE TABLET OR EFFERVESCENT Each soluble or effervescent tablet contains: Acetylsalicylic acid 300 mg. Package with 20 soluble or effervescent

Generalities

It inhibits the synthesis of prostaglandins and acts on the thermoregulatory center in the hypothalamus, it has an antiplatelet effect by inhibiting the enzyme thromboxane synthetase.

Risk in pregnancy	J d
	Adverse effects

Prolonged bleeding time, tinnitus, hearing loss, nausea, vomiting, gastrointestinal bleeding, toxic hepatitis, ecchymosis, rash, bronchial asthma, hypersensitivity reactions. Reyé syndrome in children under 6 years of age.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, active peptic ulcer or gastritis, hypoprothrombinemia, children under 6 years of age.

Interactions	

The elimination of acetylsalicylic acid increases with corticosteroids and its effect decreases with antacids. Increases the effect of oral hypoglycemic agents and oral anticoagulants or heparin.

IBUPROFFNF

Clue	Description	Indications	Route of administration and dosage
	TABLET OR CAPSULE	Mild to moderate pain. Fever.	Oral.
	Each tablet or capsule contains: Ibuprofen 200 mg.		Adults and kids older than 12 years old. 200 to 400 mg every 4 to 6 hours, depending on the intensity of symptoms, without exceeding 1200 mg per
010.000.5940.00 010.000.5940.01	Package with 10 tablets or capsules. Package with 12 tablets.		day.
010.000.5940.02 010.000.5940.03	Package with 20 tablets or capsules. Container with 30 capsules.		
	TABLET OR CAPSULE		Oral.
	Each tablet or capsule contains: Ibuprofen 400 mg.		Adults and kids older than 12 years old. 400 mg every 6 to 8 hours, depending on the intensity of symptoms, without exceeding
010.000.5941.00 010.000.5941.01	Package with 10 tablets or capsules. Package with 12 tablets.		1200 mg per day.
010.000.5941.02 010.000.5941.03 010.000.5941.04	Container with 20 capsules. Container with 30 capsules. Package with 36 tablets.		
	TABLET OR CAPSULE	1	Oral.
	Each tablet or capsule contains: Ibuprofen 600 mg.		Adults and children over 14 years of age. 600 mg every 6 to 8 hours depending on the intensity of the condition and the response to treatment.
010.000.5942.00 010.000.5942.01	Container with 10 capsules. Package with 12 tablets.		Solution and the responde to troution.
010.000.5942.02 010.000.5942.03	Container with 20 capsules. Package with 24 tablets.		D4
010.000.5942.04	Package with 30 tablets or capsules.	1	Page 1

	ORAL SUSPENSION	Oral.
	Each 100 mL contains:	Children from 6 months to 12 years of age:
	Ibuprofen 2 g.	From 5 to 10 mg/kg body weight / dose, depending of
010.000.5943.00	Container with 120 mL and measuring measure.	intensity of pain and fever administered every 6 or 8 f
	ORAL SUSPENSION	
	Each milliliter contains:	
	Ibuprofen 40 mg.	
010.000.5944.00	15 mL container with a calibrated	
	dropper, integrated or attached to the container that serves as a lid.	

Generalities

It is a prostaglandin inhibitor drug that manages through this mechanism of action to control inflammation, pain and fever. The antiprostaglandin action is through its inhibition of cyclooxygenase responsible for the biosynthesis of prostaglandins.

Risk in Pregnancy

Adverse effects

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Epigastric pain, nausea, dizziness, heartburn, sensation of fullness in the gastrointestinal tract, thrombocytopenia, skin rashes, headache, blurred vision, toxic amblyopia, fluid retention.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug

Precautions: History of: ulcerative colitis, Crohn's disease; history of HTN and/or heart failure; bronchial asthma; hematopoietic disorders, systemic lupus erythematosus or mixed connective tissue disease.

The risk of gastrointestinal bleeding, ulcer or perforation is greater when increasing doses of NSAIDs are used, in patients with a history of ulcer and over 65 years of age. Assess risk/benefit in: HTN, CHF, established coronary artery disease, peripheral arterial disease and/or cerebrovascular disease, acute intermittent porphyria.

In long-term treatment with known cardiovascular risk factors (HTN, hyperlipidemia, diabetes mellitus, smokers). Control of those undergoing major surgery. Renal, hepatic and hematological control. Risk of skin reactions at the beginning of treatment. Use minimum effective dose for the shortest time possible to minimize adverse reactions.

Interactions

Reduces effectiveness of: furosemide, thiazide diuretics. Reduces hypotensive effect of: ß-blockers, ACE inhibitors. Reduces effect of: mifepristone. Increases plasma levels of: digoxin, phenytoin and lithium. Increases toxicity of: methotrexate, hydantoins, sulfonamides. Potentiates gastrointestinal lesions with: salicylates, phenylbutazone, indomethacin and other NSAIDs. Increases effect of: oral hypoglycemic agents and insulin. Additive effect on platelet inhibition with: ticlopidine. Increases risk of hematotoxicity with: zidovudine. Power bleeding time of: anticoagulants. Increases risk of nephrotoxicity with: tacrolimus, cyclosporine. Increased risk of bleeding and gastrointestinal ulcer with: corticosteroids, bisphosphonates or oxypentiphylline, selective cyclooxygenase-2 inhibitors. Risk of bleeding with: herbal extracts.

METAMIZOLE SODIUM

Clue	Description	Indications	Route of administration and dosage
	COMPRESSED	Fever.	Oral.
	Each tablet contains: Metamizole sodium 500 mg.	Acute or chronic pain	Adults:
010.000.0108.00	Package with 10 tablets.	Some cases of visceral pain.	500-1000 mg every 6 or 8 hours.
	INJECTABLE SOLUTION		Intramuscular or intravenous.
	Each vial contains: Metamizole sodium 1 g.		Adults:
010.000.0109.00	Container with 3 vials with 2 mL.		1 g every 6 or 8 hours by deep intramuscular route. 1 to 2 g every 12 hours intravenously.

It inhibits the synthesis of prostaglandins and acts on the thermoregulatory center in the hypothalamus.

Risk in pregnancy

		Adverse effects	٦
Hypersensitivity	reactions: agranulocytosis, leuk	openia, thrombocytopenia, hemo	⊔ llytic anemia.
	Cont	traindications and Precautions	٦
Contraindicated: Hyp		. Kidney or liver failure, blood dyscrasias,	duodenal ulcer.
Precautions: Do not	administer for long periods. Hematologica	al assessment during treatment. It is not r	ecommenaea in chilaren.
		Interactions	
With neuroleptic	s it can cause severe hypotherm	nia.	
0.4 D 4 O E T 4 A	101		
PARACETAN Clue	1	Indications	Route of administration and dosage
Oluc	Description TABLET	Fever	Oral.
			1
	Each tablet contains: Paracetamol 500 mg.	Acute or chronic pain	Adults:
010.000.0104.00	Package with 10 tablets.		250-500 mg every 4 or 6 hours.
010.000.0104.00	ORAL SOLUTION		Oral.
	Each mL contains:		Children:
	Paracetamol 100 mg.		From 10 to 30 mg/kg of body weight, every 4 or 6 hours.
010.000.0106.00	Container with 15 mL, calibrated dropper		
	0.5 and 1 mL, integrated or attached to the container that serves as a lid.		
	SUPPOSITORY		Rectal.
			Adults:
	Each suppository contains: Paracetamol 300 mg.		Adults.
040 000 0405 00			300-600 mg every 4 or 6 hours.
010.000.0105.00	Container with 3 suppositories. SUPPOSITORY		
			Children:
	Each suppository contains:		
	Paracetamol 100 mg.		From 6 to 12 years: 300 mg every 4 or 6 hours. From 2 to 6 years: 100 mg every 6 or 8 hours.
010.000.0514.00	Container with 3 suppositories.		Over 6 months to one year: 100 mg each
010.000.0514.01 010.000.0514.02	Container with 10 suppositories.		12 hours.
	Container with 10 suppositories.	II.	<u> </u>
		Generalities	
It inhibits the synt	thesis of prostaglandins and acts o	n the thermoregulatory center in th	e hypothalamus.
Risk in Preg	nancy	b	
		Adverse effects	\neg
Hypersensitivity	reactions: skin rash. neutropenia		ー s, renal tubulonecrosis and hypoglycemia.
)			,
	C	raindiantians and Dragoutians	٦

Contraindications: Hypersensitivity to the drug, liver dysfunction and severe renal failure. Precautions: No more than 5 doses should be administered in 24 hours or for more than 5 days.

Interactions

The risk of hepatotoxicity to paracetamol increases in alcoholic patients and in those who take metabolism-inducing medications such as: phenobarbital, phenytoin and carbamazepine. Metamizole increases the effect of oral anticoagulants.

BUPRENORPHINE

Clue	Description	Indications	Route of administration and dosage
	SUBLINGUAL TABLET	Pain of moderate to	Sublingual.
		severe intensity secondary	
	Each sublingual tablet contains:	to:	Adults:
	Buprenorphine hydrochloride		0.2 to 0.4 mg every 6 to 8 hours.
	equivalent to 0.2 mg	Acute myocardial infarction.	
	of buprenorphine.		Children:
		Neoplasms.	3 to 6 mcg/kg body weight every 6 to 8 hours.
040.000.2100.00	Package with 10 tablets.		
040.000.2100.01	Package with 20 tablets.	Terminal disease.	

040.000.4026.00	INJECTABLE SOLUTION Each vial or vial contains: Buprenorphine hydrochloride equivalent to 0.3 mg of buprenorphine. Container with 6 vials or vials with 1 mL.	Trauma.	Intramuscular or intravenous. Adults: 0.3 to 0.6 mg/day, divide doses every 6 hours. Maximum dose of 0.9 mg/day.
040.000.2098.00	PATCH Each patch contains: Buprenorphine 20 mg. Package with 4 patches.	Chronic pain of moderate to severe intensity secondary to: Neoplasms. Terminal disease. Trauma. Neuropathic pain.	Transdermal. Adults: The dose must be regulated and adjusted individually by evaluating the intensity of the pain. Initial dose of 17.5 to 35 µg/hour of buprenorphine Release rate 35 µg/hour of buprenorphine. Transdermal.
040.000.2097.00	Each patch contains: Buprenorphine 30 mg. Package with 4 patches.		Adults: The dose must be regulated and adjusted individually by evaluating the intensity of the pain. Release rate 52.5 µg/hour of buprenorphine.
040.000.6038.00	PATCH Each patch contains: Buprenorphine 5 mg. Package with 4 patches. Nominal release speed: 5µg/h (over a 7 day period). PATCH Each patch contains: Buprenorphine 10 mg. Package with 4 patches. Nominal release speed: 10µg/h	Chronic non-oncological pain of moderate intensity, when treatment with paracetamol and/ or NSAIDs is ineffective or contraindicated.	Transdermal. Adults: The dose should be evaluated individually by evaluating the intensity of pain and the patient's analgesic response. Starting dose: one 5 mg patch (5 µg/h) for 7 days. Do not apply more than two patches at a time regardless of the concentration, nor increase the dose at intervals of less than 3 days.

	Generalities	
	agonist of the μ -opioid receptor and antagone of administration, it is 25 to 100 times more	
Risk in Pregnancy	x	
	Adverse effects	
Sedation, dizziness, headache, miosis, nau	sea, sweating and respiratory depression.	
	Contraindications and Precautions]
Contraindications: Hypersensitivity to the dissystem and prostatic hypertrophy.	rug, intracranial hypertension, liver or kidney	damage, depression of the central nervous
, ,, ,,	nvulsive syndrome, head trauma, shock and	altered consciousness of origin to be
]	Interactions	
With alcohol and tricyclic antidepressants, t	heir depressive effects increase. With MAO	inhibitors, they put life at risk due to

alterations in the function of the central nervous system, respiratory and cardiovascular function. With other opiates, anesthetics, hypnotics, sedatives, antidepressants, neuroleptics and in general with medications that depress the central nervous system, the

effects are enhanced. The effectiveness of buprenorphine can be intensified (inhibitors) (inducers).

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CAPSAICIN

I	Clue	Description	Indications	Route of administration and dosage
ſ		CREAM	Mild to moderate pain	Cutaneous.
ı			intensity in:	
ı		Each 100 grams contains:		Adults and people over 12 years old:
ı		Capsicum annuuna oleoresin extract equivalent	Rheumatoid arthritis.	
ı		to 0.035 g	Osteoarthritis.	Administer according to the case and at the discretion
ı		of capsaicin.	Post-herpetic neuralgia.	of the specialist.
ı			Diabetic neuropathy.	
ı	010.000.4031.00	Container with 40 g.	Ghost member.	
ı				

Generalities

Local action analgesic that exerts a selective desensitizing action, by suppressing the activity of type C sensory fibers and

Risk in Pregnancy	b
	Adverse effects

Erythema, burning at the application site that decreases in intensity with application in the first days of treatment.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, on wounded or irritated skin and mucous membranes.

Precautions: Apply to the affected area without rubbing. Do not apply simultaneously with another topical medication on the same area.

Interactions

None of clinical importance.

LYSINE CLONIXINATE

eliminating substance P from the nerve terminals.

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Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Mild to moderate pain	Intramuscular or intravenous.
		intensity.	
	Each vial contains: Clonixinate		Adults:
	Lysine 100 mg.		100 mg every 4 to 6 hours, maximum dose 200 mg every
010.000.4028.00	Container with 5 vials of 2 mL.		6 hours.
I			

Generalities

Cyclooxygenase inhibitor analgesic, blocking the synthesis of PGE and PGF2.

Risk in Pregnancy	b
	Adverse effects
Name of the Name of the American of the Name of the Na	

Nausea, vomiting, drowsiness, dizziness and vertigo.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, breastfeeding, peptic ulcer, children under 12 years of age, high blood pressure and kidney or liver failure.

Interactions

With non-steroidal anti-inflammatory drugs, their gastrointestinal adverse effects may increase.

DEXMEDETOMIDINE

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Postoperative pain.	Continuous intravenous infusion.
			Adults:
	Each vial contains: Dexmedetomidine hydrochloride	of	Initial: 1.0 g/kg body weight for 10 minutes.
	200 μg.		Maintenance: 0.2 to 0.7 g/kg body weight; The speed should be adjusted according to clinical response.
010.000.0247.00 010.000.0247.01 010.000.0247.02	Container with 1 vial. Container with 5 vials. Container with 25 vials.		Administer diluted in intravenous solution packaged in glass bottles.

		Generalities	1
	the ÿ2 adrenergic receptor of edation and analgesia, without		ons of the spinal cord and locus ceruleus,
Risk in Preg	nancy	d	
		Adverse effects	1
Hypotension, hypo	ertension, bradycardia, nausea a	and hypoxia.	_
	Cc	ntraindications and Precautions	1
Contraindications Precautions: Live	s: Hypersensitivity to the drug.		_
i recautions. Live	i fallure.	Interactions]
Increases the anesthe	etic, sedative, hypnotic and opioid effe	cts of sevoflurane, isoflurane, propofol, alfer	ntanil and midazolam.
DEXTROPRO	OPOXYPHENE		
Clue	Description	Indications Mild	Route of administration and dosage
	CAPSULE OR TABLET	to moderate pain.	Oral.
	Each capsule or tablet contains:		Adults:
	Dextropropoxyphene		65 mg every 6 to 8 hours, maximum daily dose
040 000 0407 00	hydrochloride 65 mg.		390 mg.
040.000.0107.00	Package with 20 capsules or tablets.		
			_
Opioid agonist the	at decreases the perception o	Generalities pain and the emotional response to	oit.
Risk in Pregi	nancy	С	
0 1		Adverse effects	
Sedation, dizzines	ss, neadache, miosis, nausea, s	weating and respiratory depression.	_
Contraindications		ntraindications and Precautions	dnov domogo doprosojon of the central
	prostatic hypertrophy and child		dney damage, depression of the central
		Interactions	٦
		and tricyclic antidepressants. Increa	
carabamazepine	beta-blockers and doxepin. If	icreases its concentration with fiton	avii.
ETHOFENAN	<i>1</i> ΔΤΕ		
Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Rheumatoid arthritis	Intramuscular.
	Each vial contains: Etofenamate	Ankylosing spondylitis Osteoarthrosis and spondyloarthrosis. Painful shoulder.	Adults:
040 000 4026 00	1 g.	Lumbago.	One vial of 1 g every 24 hours, up to a maximum of
010.000.4036.00	Container with a 2 mL vial.	Sciatica. Stiff neck.	three.
		Tenosynovitis. Bursitis.	
		Acute attack of gout.	
		Generalities	
Derived from fluf	enamic acid that inhibits the sy	nthesis of prostaglandins, leukotrie	ப nes, bradykinin, histamine and complement.
	632		
Risk in Preg	nancy	С	
		Adverse effects	

Hypersensitivity reactions, headache, vertigo, nausea, vomiting, dizziness, fatigue, dysuria and epigastric pain.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, alterations in coagulation and hematopoiesis, gastric or duodenal ulcer, kidney, liver or heart failure, pregnancy and lactation.

Precautions: Its administration is not recommended in children under 14 years of age.

Interactions	
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With corticosteroids or other anti-inflammatories it can cause acid-peptic disease. It may reduce the action of furosemide, thiazides and beta-blocking antihypertensives. It can increase the plasma level of digoxin, phenytoin, methotrexate, lithium or oral hypoglycemic agents, its excretion decreases with probenecid and sulfinpyrazone.

FENTANYL

Clue	Description	Indications	Route of administration and dosage
	PATCH	Chronic pain.	Transdermal.
	Each patch contains: Fentanyl	Pain syndrome.	Adults:
	4.2 mg.		
040.000.4027.00		Intractable pain requiring opioid analgesia.	4.2 mg every 72 hours. Maximum dose 10 mg.
040.000.4027.00	Package with 5 patches.		Requires a narcotic prescription.
	ORAL TABLET	Treatment of breakthrough pain (DI)	Oral
	EFFERVESCENT	in adult cancer patients already receiving opioid	The sublingual route of administration can be considered
		maintenance treatment for chronic cancer-	optional.
	Each tablet contains	related pain.	Patients should be titrated to the dose of Fentanyl buccal
	Fentanyl Citrate 0.157 mg equivalent	·	tablet that provides adequate analgesia, with tolerability of
	to 0.100 mg Fentanyl		adverse events:
			The initial dose is always 100mcg.
040.000.6188.00	Container with 28 tablets		The maximum dose per episode of breakthrough pain is
	Buccal EFFERVESCENT	1	800mcg.
	ORAL TABLET		When the episode of breakthrough pain is not relieved
			within 30 minutes, patients can take only one tablet with the
	Each tablet contains		same dose for that episode. That is, they should take a
	Fentanyl Citrate 0.943 mg equivalent to		maximum of two doses of fentanyl for each episode of
	0.600 mg Fentanyl		breakthrough pain.
040.000.6191.00	Container with 28 tablets		
040.000.0131.00	Somano: War 20 tablete		Titrate dose using multiples of 200mcg tablets for doses greater than 400mcg (600mcg and 800mcg)
	Buccal EFFERVESCENT	1	greater than 400micg (600micg and 600micg)
	ORAL TABLET		
			Patients should wait at least
	Each tablet contains		4 hours before treating another episode of breakthrough
	Fentanyl Citrate 1,257 mg equivalent to		pain with fentanyl buccal tablet.
	0,800 mg Fentanyl		
040.000.6192.00	Container with 28 tablets		
040.000.0192.00	Container with 20 tablets		
	I	i l	

		Generalities	
	at acts mainly on μ and \ddot{y} cowerful than morphine.	receptors. It produces a state of deep a	nalgesia and unconsciousness. It is 50 to
Risk in Pregr	nancy	С	
		Adverse effects	
		i, vomiting, muscle rigidity, euphoria, bro fusion, hallucinations, miosis, bradycard	
		Contraindications and Precautions	
		anyl and opioids, treatment with monoal dysfunction, cardiac arrhythmias, psycho	
Precautions: Children	under 12 years of age.		
		Interactions	
Associated with benz	odiazepines it produces respi	ratory depression. Monoamine oxidase inhibitors	potentiate the effects of fentanyl, Increase its
concentration with rite		, , , , , , , , , , , , , , , , , , , ,	,
HYDROMORI	PHONE		
Clue	Description	Indications	Route of administration and dosage
	TABLET	Moderate to severe pain from:	Oral.
		•	
	Each tablet contains:	Major surgery.	Adults:
	Each tablet contains: Hydromorphone	•	
		Major surgery. Cancer. Burns. Renoreteral and biliary colic.	Adults: 2 mg to 4 mg every 4 to 6 hours
040.000.2113.00	Hydromorphone hydrochloride 2 mg.	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction.	Adults:
040.000.2113.00	Hydromorphone	Major surgery. Cancer. Burns. Renoreteral and biliary colic.	Adults: 2 mg to 4 mg every 4 to 6 hours
040.000.2113.00	Hydromorphone hydrochloride 2 mg.	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction.	Adults: 2 mg to 4 mg every 4 to 6 hours
040.000.2113.00	Hydromorphone hydrochloride 2 mg.	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction.	Adults: 2 mg to 4 mg every 4 to 6 hours
	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities	Adults: 2 mg to 4 mg every 4 to 6 hours
Narcotic opiate ag	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by selectiful stimuli.	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response.
Narcotic opiate a	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by selectiful stimuli.	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response.
Narcotic opiate ag	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select ful stimuli.	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response.
Narcotic opiate at that produce pain Risk in Pregr	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select ful stimuli. nancy ession, vomiting, muscle	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response. mitters from the afferent nerve terminals
Narcotic opiate at that produce pain Risk in Pregr	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select ful stimuli. nancy ession, vomiting, muscle	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans c Adverse effects rigidity, euphoria, bronchoconstriction, of	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response. mitters from the afferent nerve terminals
Narcotic opiate ag that produce pain Risk in Pregr Respiratory depre bradycardia, conf	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select iful stimuli. nancy ession, vomiting, muscle fusion, dizziness, anxiety Hypersensitivity to the	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans c Adverse effects rigidity, euphoria, bronchoconstriction, or, drowsiness and seizures.	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response. mitters from the afferent nerve terminals orthostatic arterial hypotension, miosis, mine oxidase inhibitors, head trauma,
Narcotic opiate at that produce pain Risk in Pregr Respiratory depre bradycardia, conf Contraindications intracranial hyper	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select iful stimuli. nancy ession, vomiting, muscle fusion, dizziness, anxiety Hypersensitivity to the	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans c Adverse effects rigidity, euphoria, bronchoconstriction, or, drowsiness and seizures. Contraindications and Precautions drug and opioids, treatment with monoa	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response. mitters from the afferent nerve terminals orthostatic arterial hypotension, miosis, mine oxidase inhibitors, head trauma,
Narcotic opiate at that produce pain Risk in Pregr Respiratory depre bradycardia, conf Contraindications intracranial hyper	Hydromorphone hydrochloride 2 mg. Package with 100 tablets. gonist that acts by select iful stimuli. nancy ession, vomiting, muscle fusion, dizziness, anxiety Hypersensitivity to the tension and respiratory of	Major surgery. Cancer. Burns. Renoreteral and biliary colic. Acute myocardial infarction. Multiple trauma patients. Generalities ively inhibiting the release of neurotrans c Adverse effects rigidity, euphoria, bronchoconstriction, or, drowsiness and seizures. Contraindications and Precautions drug and opioids, treatment with monoa	Adults: 2 mg to 4 mg every 4 to 6 hours according to the patient's response. mitters from the afferent nerve terminals orthostatic arterial hypotension, miosis, mine oxidase inhibitors, head trauma,

Associated with benzodiazepines and alcohol it produces respiratory depression. Monoamine oxidase inhibitors, antihypertensives and diuretics enhance its hypotensive effects, with anticholinergics it causes severe abdominal distention.

KETOROLAC

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Pain of mild to moderate intensity.	Intramuscular or intravenous.
	Each vial or vial contains:		Adults:
	Ketorolac-tromethamine 30 mg.		30 mg every 6 hours, maximum dose 120 mg/day. Treatment should not exceed 4 days.
010.000.3422.00	Container with 3 vials or		Treatment should not exceed 4 days.

	3 vials of 1 mL.			Children:
				0.75 mg/kg body weight every 6 hours.
				Maximum dose 60 mg/day. Treatment should not exceed 2 days.
			1	
			Generalities	
It inhihite the enz	vme cyclooxygenas	a and theref	ore the synthesis of prostaglandin	
it illinibits the enz	yme cyclooxygenas	e and merer	ore the synthesis or prostagiandin	5.
Diale in Draw			С	
Risk in Pregi	nancy			
			A 1	٦
			Adverse effects	_
				epsia, anorexia, depression, hematuria,
paleness, high bl	ood pressure, dysg	eusia and dia	zziness.	
		_		٦
			traindications and Precautions	_
	,,	•		natory analgesics, peptic ulcer and renal
failure and hemo	rrhagic diathesis, po	stoperative	tonsillectomy in children and preop	perative use.
			lata an ation a	٦
			Interactions	_
				dverse effects. Decreases the diuretic
response to turos	semide. Probenecid	increases its	s plasma concentration. Increases	plasma lithium concentration.
	_			
METHADONE				
Clue	Description SOLUTION		Indications Relief	Route of administration and dosage Oral.
	SOLUTION		of severe pain.	Oral.
	Each milliliter contains:			Adults.
	Methadone			Dose 5 to 20 mg every 4 to 8 hours, being able to modify
	Hydrochloride 10 mg.			the dose as well as the administration time interval
040.000.5910.00	Container with 30 mL and	1 mL dropper.		according to the patient's analgesic needs from every 8 to 12 hours.
				to 12 flouis.
			0 1111	7
			Generalities	_
Dura aniata agan	ist of synthetic origi	o with alight	ly greater national than marphine	langer duration of action, and loss
			ctivity at μ receptors.	longer duration of action, and less
	presents annity a	ia manca at	ouvily at a receptors.	
Risk in Pregi	nancy		С	
		-		
			Adverse effects	
Dizzinana andati	an naugae and uan	aitina Othar	s in aluda mantal confusion, draws	in and lathermy, decreased noveling and
				iness, lethargy, decreased psychic and ler sphincter spasm, urinary retention,
				more frequently than other opioids.
, ,	, , ,		3	
		Con	traindications and Precautions	_
0 1 1 1 1 1 1	11	a .		
			vents presenting respiratory depre	ession, nead trauma, intracranial combination with central nervous system
, ·	cations, pregnancy		, ,,	combination with central hervous system
				s, hypokalemia, hypomagnesemia), elderly
patients, alteration	ns in renal and/or li	ver function,	Adison's disease, prostatic hypert	rophy, pulmonary disease, postoperative
		n machinery	, cancer, medications that affect s	erum concentrations of alpha 1 acid
glycoprotein, elde	erly.			
				_
			Interactions	1

Exacerbation of the effects of methadone with the use of CNS depressant medications, alcohol. The combination of agents with an anticholinergic effect increases the risk of severe abdominal distention, which may cause paralytic ileus and/or urinary retention. Coadministration of drugs that inhibit CYP3A4 activity such as antifungal agents (ketoconazole) may result in decreased methadone tapering. Monoamine oxidase (MAO) inhibitors may increase the risk of hypertension or hypotension, respiratory depression, and cardiovascular collapse. Arterial hypotension with the concomitant use of antihypertensives and diuretics. Selective serotonin reuptake inhibitors (SSRIs) increase methadone toxicity. Urinary cidifiers, anticonvulsants (phenytoin, phenobarbital), enzyme inducers and antivirals (zidovudine) increase the risk of withdrawal syndrome.

MORPHINE

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Moderate to severe acute or chronic pain caused by:	Intravenous, intramuscular or epidural.
	Each vial contains: morphine sulfate		Adults:
	Pentahydrate 2.5 mg.	Cancer (preterminal and terminal phase).	5 to 20 mg every 4 hours, depending on therapeutic response.
040.000.2099.00	Container with 5 vials with 2.5 mL.	Acute myocardial infarction.	Epidural: 0.5 mg, followed by 1-2 mg until
	INJECTABLE SOLUTION		10 mg/day.
	Each vial contains:	In the control of postsurgical	Children:
	Morphine sulfate pentahydrate 50 mg.	pain in polytraumatized patients and in those with burns.	0.05-0.2 mg/kg every 4 hours up to 15 mg.
040.000.2102.00	Container with 1 vial with 2.0 mL.		Requires a narcotic prescription.
	INJECTABLE SOLUTION		
	Each vial contains: morphine sulfate 10 mg.		
040.000.2103.00	Container with 5 vials.		
	TABLET OR CAPSULE EXTENDED RELEASE		Oral.
	EXTENDED RELEASE		Adults:
	Each extended-release tablet or capsule contains: morphine sulfate 100 mg.		30 to 60 mg every 8 to 12 hours.
040.000.2104.00	Package with 14 extended-release tablets or capsules.		
040.000.2104.01	Package with 20 extended-release tablets or capsules.		
040.000.2104.02	Package with 40 extended-release tablets or capsules.		
	TABLET OR CAPSULE EXTENDED RELEASE		
	Each extended-release tablet or capsule contains: morphine sulfate 60 mg.		
040.000.2105.01	Package with 20 extended-release tablets or capsules.		
040.000.2105.02	Package with 40 extended-release tablets or capsules.		
	TABLET		1
	Each tablet contains: Morphine sulfate pentahydrate equivalent to 30 mg of morphine sulfate.		
040.000.4029.00	Package with 20 tablets.		

	·		
		Generalities	
	f the μ and \ddot{y} receptors. Its anal K at the level of the spinal core	gesic effect has been related to the	e activation of µ receptors
		b	
Risk in Pregi	nancy	Ь	
		Adverse effects	
	ession, nausea, vomiting, urtication, seizures and addiction.	aria, euphoria, sedation, bronchoc	onstriction, orthostatic arterial hypotension,
	Cor	traindications and Precautions	
	persensitivity to the drug, treatment with urrhythmias, psychosis, hypothyroidism		rain injury, intracranial hypertension and respiratory
	-		
		Interactions	_
		nenothiazines, hypnotics, neurolep	
respiratory depre	ssion. Mondamine oxidase inin	bitors enhance the effects of morp	mille.
VALBUFINA			
Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Pain of moderate to	Intramuscular, intravenous or subcutaneous.
		severe associated with:	Adulta
	Each vial contains: Hydrochloride	Acute myocardial infarction.	Adults:
	Nalbuphine 10 mg.	Acute myocardiai ililarction.	10 to 20 mg every 4 to 6 hours.
040 000 0400 00		Scanning procedures	
040.000.0132.00	Container with 3 vials of 1 mL.	diagnosis that may be bothersome or painful.	Maximum dose: 160 mg/day.
040.000.0132.01	Container with 5 vials of 1 mL.		Maximum dose per application: 20 mg.
		1	<u> </u>
		Generalities	
	ntagonist that is chemically rela receptors and antagonism of $\it m$. It produces analgesia through its action
Risk in Pregi	nancy	b	
- Kisk iii i Tegi			_
		Adverse effects	
Headache, sedat depression.	tion, nausea, vomiting, constipa	ttion, urinary retention, dry mouth,	excessive sweating and respiratory
	Cor	traindications and Precautions	
Contraindications emotional.	s: Hypersensitivity to the drug, i	ntracranial hypertension, liver and	kidney failure and instability
		Interactions	٦
With benzodiazepine	s it causes respiratory depression. Mo	Interactions noamine oxidase inhibitors potentiate the	effects of nalbuphine.

OXYCODONE

Clue	Description	Indications	Route of administration and dosage
	RELEASE TABLET	Severe pain secondary to	Oral.
	PROLONGED	conditions:	
			Adults:
	Each tablet contains:	Osteoarticular.	
	Oxycodone Hydrochloride 20 mg.		Take 10 to 20 mg every 12 hours.
		Chronic muscles.	Increase the dose according to the intensity of the pain
			and at the discretion of the specialist.
040.000.4032.00	Package with 30 prolonged	Cancer.	
040.000.4032.01	release tablets. Package with 100 extended-release		
	tablets.		
	EXTENDED RELEASE TABLET		
	Each tablet contains:		

040.000.4033.00	Oxycodone hydrochloride 10 mg. Package with 30 prolonged release		
040.000.4033.01	tablets. Package with 100 extended-release tablets.		
			_
	ith pure action on the ÿ, ÿ and ÿ o inly analgesic, anxiolytic and sed		spinal cord. The effect
Risk in Preg	nancy c		
		A di	7
	ession, apnea, respiratory arrest, or drowsiness, vertigo, pruritus, hea		J ypotension, constipation, constipation, sical dependence.
abdomen, acute I		oxycodone, morphine, or other] sthma, hypercapnia, paralytic ileus, acute opioids.
		Interactions	ī
•	e effects of phenothiazines, tricycl ihypertensives. Its effect decrease	ic antidepressants, anesthetics,	J hypnotics, sedatives, alcohol, muscle ibitors.
OXYCODON	IE/NALOXONE		
Clue	Description	Indications	Route of administration and dosage
	RELEASE TABLET PROLONGED	Moderate to severe chronic pain that does not respond to treatment with	Oral. Adults
	Each tablet contains:	non-opioid analgesics.	
	Oxycodone Hydrochloride 20 mg Naloxone hydrochloride		The common starting dose in opioid-naïve patients or patients with moderate to chronic pain
	Dihydrate equivalent to 10 mg of anhydrous naloxone hydrochloride		severe uncontrolled with weaker opioids, is 1 10 mg/5 mg tablet, at 12 hour intervals.
040.000.6177.00	Package with 28 extended-release tablets.		Patients with mild liver failure and in patients with kidney
			failure: One 5/2.5 mg tablet every 12 hours.
			One 5/2.5 mg tablet every 12 hours. Subsequently, carefully titrate the 8de frequently every
	opioid receptor agonist. It has affi		One 5/2.5 mg tablet every 12 hours. Subsequently, carefully titrate the 8de frequently every 1-2 days if necessary, to achieve pain relief.
	opioid receptor agonist. It has affi eripheral organs. The binding of c	nity for endogenous mu, kappa	One 5/2.5 mg tablet every 12 hours. Subsequently, carefully titrate the 86 frequently every 1-2 days if necessary, to achieve pain relief.
spinal cord and p	opioid receptor agonist. It has affi eripheral organs. The binding of c ef.	nity for endogenous mu, kappa	One 5/2.5 mg tablet every 12 hours. Subsequently, carefully titrate the 8de frequently every 1-2 days if necessary, to achieve pain relief.
spinal cord and presults in pain reli	opioid receptor agonist. It has affi eripheral organs. The binding of c ef.	nity for endogenous mu, kappa	One 5/2.5 mg tablet every 12 hours. Subsequently, carefully titrate the 8de frequently every 1-2 days if necessary, to achieve pain relief.
spinal cord and p results in pain reli Risk in Preg Respiratory depre	opioid receptor agonist. It has affi eripheral organs. The binding of c ef. nancy c	nity for endogenous mu, kappa a exycodone to endogenous opioid Adverse effects circulatory depression, arterial h	One 5/2.5 mg tablet every 12 hours. Subsequently, carefully titrate the 8ds frequently every 1-2 days if necessary, to achieve pain relief. and delta opioid receptors in the brain, 1 receptors in the central nervous system protension, constipation, constipation,

respiratory with hypoxia, elevated blood levels of carbon dioxide, with pulmonale, cardiac arrhythmias, uncontrolled bronchial asthma, severe chronic obstructive pulmonary disease, paralytic ileus induced by cerebrospinal or intracranial, brain tumor or traumatic brain injury (due to the risk of elevated intracranial pressure), abnormal seizure disorders, suspected surgical acute abdomen, delayed gastric emptying, alcoholism, delirium tremens, simultaneous administration with MAO inhibitors and up to 2 weeks after their suspension, children under 12 years of age.

Precautions: Pregnancy and lactation, seizure disorders, respiratory depression, pharmacological dependence.

Interactions

They potentiate the effects of anticholinergics, antihypertensives, coumarin derivatives, neuromuscular blocking agents, tricyclic antidepressants, anesthetics, opioid agonist analgesics (including morphine, pethidine), sedatives, alcohol and muscle relaxants-antagonists (including pentazocine, butorphanol, buprenorphine).

PARACETAMOL

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Moderate to postoperative pain	Intravenous.
		severe in children and adults in	
	Each bottle contains:	adjuvant use with opioids in whom the	Adults, adolescents and children weighing more than 50
	Paracetamol 500 mg.	use of NSAIDs is contraindicated.	kg:
			1g per dose every 4 hours up to four times a day.
010.000.5720.01	Container with four jars with		
	50 mL.		Adults, adolescents and children weighing less than 50 kg.
010.000.5720.02	Container with ten bottles with 50 mL		
			15 mg/Kg of body weight per dose up to four times a day.
	INJECTABLE SOLUTION		
	Each bottle contains:		Full-term newborns and children up to 10
	Paracetamol 1 g.		Kg of weight.
			7.5 mg/Kg of body weight per dose up to four times a day.
010.000.5721.01	Container with four jars with		
	100 mL.		
010.000.5721.02	Container with ten jars with		
	100 mL.		

Generalities

The mechanism of the analgesic and antipyretic properties of paracetamol has not yet been established. The mechanism of action can have central and peripheral actions.

Risk in Pregnancy	С

Adverse effects

Thrombocytopenia, tachycardia, nausea, vomiting, fulminant hepatitis, liver necrosis, liver damage, increased liver enzymes, anaphylactic shock, anaphylaxis, angioneurotic edema, erythema, redness, pruritus, rash, urticaria.

Contraindications and Precautions

Contraindications: hypersensitivity to the drug.

Precautions: It is recommended to use appropriate oral analgesic treatment as soon as this route of administration is possible. Doses higher than recommended carry a risk of very serious liver damage.

Interactions

Concomitant paracetamol with phenytoin may cause a decrease in the effectiveness of paracetamol and increase the risk of hepatotoxicity. Probenecid causes an almost 2-fold reduction in the clearance of paracetamol by inhibiting its conjugation with glucuronic acid. Salicylamide may prolong the elimination half-life (t1/2) of paracetamol. The concomitant use of paracetamol (4 g per day for at least 4 days) with oral anticoagulants may produce slight variations in INR values.

TAPENTADOL

Clue	Description	Indications	Route of administration and dosage
	RELEASE TABLET PROLONGED	Narcotic analgesic. Treatment of moderate to severe	Oral.
	Each extended-release tablet contains:	chronic pain of oncological and non- oncological origin, requiring opioid analgesia.	Adults: Titration: start treatment with doses of 50 mg every 12 hours, increasing by 50 mg every 3 days
	Tapentadol hydrochloride equivalent to 50 mg	_	until adequate pain control is achieved.

040.000.5915.00	of tapentadol. Package with 30 prolonged release
	tablets. EXTENDED RELEASE TABLET
	Each extended-release tablet contains:
	Tapentadol hydrochloride equivalent to 100 mg of tapentadol.
040.000.5916.00	Package with 30 prolonged release tablets.

Generalities

Tapentadol is a centrally acting synthetic analgesic that combines opioid and non-opioid activity in a single molecule. Their analgesic efficacy is related to their activity as opioid agonists of the ÿ receptor as well as the inhibition of norepinephrine reuptake.

Risk in Pregnancy	
	Adverse effects
Nausea, dizziness, constipation, drowsiness	and headache.
	Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, significant respiratory depression; acute or severe bronchial asthma or hypercapnia; paralytic ileus; acute intoxication with alcohol, hypnotics, centrally acting analgesics or psychotropic drugs, MAO inhibitors; Severe liver or kidney insufficiency.

Cautions: Potential for abuse; respiratory depression; patients with brain damage and increased intracranial pressure; convulsions; patients with severe liver function impairment; patients with severe renal function impairment; pancreatic or bile duct disease.

Interactions	
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Monoamine oxidase (MAO) inhibitors and patients who received other opioid receptor agonist analgesics, general anesthetics, phenothiazine, other tranquilizers, sedatives, hypnotics or other CNS depressants (including alcohol and illicit drugs) concomitantly may exhibit additive depression in the CNS.

TRAMADOL

Clue	Description	Indications	Route of administration and dosage
	INJECTABLE SOLUTION	Moderate to severe pain of acute or	Intramuscular or intravenous.
		chronic origin due to:	
	Each vial contains: Tramadol		Adults and children over 14 years of age:
	Hydrochloride 100 mg.	Fractures.	
		Dislocations.	50 to 100 mg every 8 hours.
040.000.2106.00	Container with 5 yials of 2 mL.	Acute myocardial infarction. Cancer.	Maximum dose 400 mg/day.
	EXTENDED RELEASE TABLET	Treatment of chronic pain of moderate	Oral.
	EXTENSES RELEASE TABLET	non-cancer origin	Oran.
		to severe.	Adults:
	Each extended-release tablet		Titration: start with a dose of 150 mg once every 24
	contains: Tramadol Hydrochloride 150 mg		hours.
			If pain relief is not achieved, the dose should be
040.000.6140.00	Package with 10 prolonged release		adjusted slowly until relief is achieved.
	tablets. Package with 30 prolonged release		
040.000.6140.01	tablets.		Maintenance: continue with the effective dose
	EXTENDED RELEASE TABLET	1	determined during titration every 24 hours.
	EXTENDED RELEASE TABLET		determined during initiation every 24 nours.
	Each extended-release tablet		The total daily dose of
	contains: Tramadol Hydrochloride 200 mg		400 mg with the exception of its use in special
	,		clinical circumstances.
040.000.6141.00	Package with 10 prolonged release		
	tablets.		
040.000.6141.01	Container with 30 tablets		

	extended release.			
			Generalities	
with a higher affin			. It is a non-selective pure agor	ist of the mu, delta, kappa opioid receptors its analgesic effect is the inhibition of neurona
Risk in Pregn	ancv		С	
	a, vomiting, dry mouth, he		Adverse effects palpitations, tachycardia, brady	cardia, dyspnea, anorexia, diarrhea, agitation,
		Contra	aindications and Precautions	
		_		ics, analgesics that act at a central level, opioids or 4 days. Patients with epilepsy who are not adequately
			lata and the same	
Consomitant adm	inintention of tennedal wit		Interactions	udia a alaah al maay matantiata tha CNC
depressant effects		in other c	entrally acting medications, incl	uding alcohol, may potentiate the CNS
TRAMADOL	-PARACETAM() DL		
Clue	Description		Indications	Route of administration and dosage
	TABLET Each tablet contains: Tramadol		Moderate to severe pain, acute or chronic.	Oral Adults and people over 16 years of age:
	Hydrochloride 37.5 mg. Paracetamol 325.0 mg.			37.5 mg /325 mg to 75 mg / 650 mg every 6 to 8 hours, up to a maximum of 300 mg/2600 mg per day.
040.000.2096.00	Package with 20 tablets.			
			Generalities	
ÿ-opioids and wea Paracetamol is ar	ak inhibition of norepineple nother centrally acting and	nrine and algesic. It	serotonin reuptake.	of an M1 metabolite to receptors In inhibition of the nitric oxide channel and aspartate and
Risk in Pregn	ancy		X	
<u> </u>		9	Adverse effects	
Vertigo, nausea a	nd drowsiness.			
		Contr	aindications and Precautions	
Contraindications	: Hypersensitivity to drug			l Itral action, opioids or psychotropic drugs.
	ould not be coadminister	,	ents who are receiving MAO inh	
		5	Interactions	\neg
MAO and serotor	nin reuntake inhihitors. Ca	rhamaze	nine Quidine Warfarin and CY	P2D6 inhibitors