Update date: February 1, 2024

Group No. 3: Cardiology

ACETYLSALICYLIC ACID

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|--|------------------------------------|
| | TABLETS | Secondary prevention of | Oral |
| | Each tablet contains: | cerebral vascular disease (CVD). | Adults |
| | | | 100 mg every 24 hours |
| | Acetylsalicylic acid 100 mg with or without coating. | Reduction in the risk of morbidity and | |
| | | mortality in patients with previous | |
| 010.000.6222.00 | Package with 28 tablets. | myocardial infarction. | |

Generalities

It has antiplatelet effect by inhibiting the enzyme thromboxane synthetase.

Risk in Pregnancy

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

Hypersensitivity to salicylates and other similar substances, active acid peptic disease, history of bronchial asthma, use in combination with methotrexate, bleeding diathesis, last trimester of pregnancy, severe heart, kidney and/or liver failure.

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.

AMLODIPINE

| Clue | Description | Indication | ns | Route of administration and dosage |
|-----------------|---|------------------------|----------|------------------------------------|
| | TABLET OR CAPSULE | Systemic hypertension. | arterial | Oral. |
| | Each tablet or capsule contains: AmLodipine | | | Adults: |
| | Besylate or Maleate | Angina pectoris (sta | able and | |
| | | Prinzmetal variant). | | |
| | equivalent to 5 mg of | | | 5 to 10 mg every 24 hours. |
| | amLodipine. | | | |
| 010.000.2111.00 | Package with 10 tablets or capsules. | | | |
| 010.000.2111.01 | Package with 30 tablets or capsules. | | | |
| | Each tablet or capsule contains: AmLodipine | | | |
| | besylate or maleate Equivalent to 10 mg of | | | |
| | amLodipine. | | | |

Generalities

Calcium channel blocker that inhibits calcium entry into cardiac and vascular smooth muscle cells.

Risk in Pregnancy

d

Adverse effects

Headache, fatigue, nausea, asthenia, drowsiness, edema, palpitations and dizziness.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, the elderly, liver damage and deficiency of myocardial perfusion.

Interactions

With antihypertensives, its hypotensive effect increases.

CAPTOPRIL

| Clue | Description | Indications | Route of administration and dosage |
|------|-------------|-------------|------------------------------------|

| | TABLET Each tablet contains: Captopril 25 mg. | Systemic arterial hypertension. Heart failure. | Oral. Adults: 25 to 50 mg every 8 or 12 hours. |
|-----------------|---|---|--|
| 010.000.0574.00 | Package with 30 tablets. | | In heart failure administer 25 mg every 8 or 12 hours. |
| | | | Maximum dose: 450 mg/day. |
| | | | Children: |
| | | | Initial 1.3 to 2.2 mg/kg body weight |
| | | | 0.15 to 0.30 mg/kg body weight/each 8 hours. |
| | | | Maximum daily dose: 6.0 mg/kg body weight. |
| | | | In heart failure, start with 0.25 mg/kg of body weight/day |
| | | | and increase to 3.5 mg/kg of body weight every 8 hours. |
| | | | |
| | 40 | Conoralitica | |

Generalities

Inhibits angiotensin-converting enzyme, which prevents the formation of angiotensin II from angiotensin

I. Decreases peripheral vascular resistance and reduces sodium and water retention.

| Risk in Pregnancy | d | | |
|--|--|--|--|
| | Adverse effects | | |
| Dry cough, chest pain, proteinuria, headache, dysgeusia, tachycardia, hypotension, fatigue and diarrhea. | | | |
| | Contraindications and Precautions | | |
| Contraindications: Hypersensitivity to | o captopril, renal failure, immunosuppression, hyperkalemia and chronic cough. | | |
| | Interactions | | |

Diuretics and other antihypertensives increase their hypotensive effect. Non-steroidal anti-inflammatory drugs reduce the antihypertensive effect. Hyperkalemia is favored with potassium salts or potassium-sparing diuretics.

CHLORTHALIDONE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|-------------------------------|---------------------------------|--|
| | TABLET Each tablet contains: | Peripheral edema. | Oral. Adults: |
| | Chlorthalidone 50 mg. | Systemic arterial hypertension. | Addits. |
| | B | | Diuretic: 25 to 100 mg/day. |
| 010.000.0561.00 | Package with 20 tablets. | | Antihypertensive: 25 to 50 mg/day. |
| | | | Children: |
| | | | 1 to 2 mg/kg body weight or 60 mg/m2 body surface every 48 hours. |
| | | | • |

Generalities

Diuretic that blocks the reabsorption of sodium and chlorine at the distal tubule level.

| Risk in Pregnancy | d |
|-------------------|-----------------|
| | Adverse effects |

Hyponatremia, hypokalemia, hyperglycemia, hyperuricemia, hypercalcemia, aplastic anemia, hypersensitivity and dehydration.

Contraindications and Precautions

Contraindications: Hypersensitivity to chlorthalidone, anuria, liver failure, kidney failure, metabolic alkalosis, gout, diabetes mellitus and hydroelectrolyte disorders.

Precautions: For chronic treatment, serum potassium concentrations should be monitored at the beginning of therapy and then after 3 to 4 weeks.

Interactions

It increases the hypotensive effect of antihypertensives, increases plasma levels of lithium, and decreases its absorption with cholestyramine.

DIGOXIN

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|---|---|
| 3 | TABLET | Acute pulmonary edema. | Oral. |
| 010.000.0502.00 | Each tablet contains: Digoxin 0.25 mg. Package with 20 tablets. ELIXIR | Heart failure. Supraventricular tachyarrhythmias. Fibrillation. | Adults: Load: 0.4 to 0.6 mg. Subsequent 1st day: 0.1 to 0.3 mg each 8 hours. Maintenance: 0.125 to 0.5 mg every 8 hours. Oral. |
| 010.000.0503.00 | Each mL contains: Digoxin 0.05 mg. Container containing 60 mL with a 1 mL calibrated dropper integrated or attached to the bottle and serves as a lid. | Atrial flutter. | Children: Premature babies: 15 to 40 mcg/kg body weight. Newborn: 30 to 50 mcg/kg body weight. Two to five years: 25 to 35 mcg/kg body weight. Five to ten years: 15 to 30µmcg/kg body weight. Over ten years: 8 to 12 µg/kg body weight. Note: The impregnation dose must be administered within 24 hours. Half of the calculated dose is administered immediately, a quarter 8 hours later, and the remaining quarter 16 hours after the first. The daily maintenance dose corresponds to 1/3 of the impregnation dose and should be administered 24 hours after the last impregnation dose. |
| 010.000.0504.00 | INJECTABLE SOLUTION Each vial contains: Digoxin 0.5 mg. Container with 6 vials of 2 mL. | | Intravenous. Adults: Initial: 0.5 mg followed by 0.25 mg every 8 hours, for one or two days. Maintenance: half the impregnation dose in one dose every 24 hours. Then continue with oral medication. Children: Use 2/3 parts of the calculated oral dose. The safety margin is very narrow. |

| | Generalities | | |
|---|--------------|--|--|
| They reinforce myocardial contraction by promoting movement of calcium to the intracellular cytoplasm and inhibiting sodiur | | | |
| potassium ATPase. | | | |

| Risk in Pregnancy | С |
|-------------------|-----------------|
| | |
| | Adverse effects |

Anorexia, nausea, vomiting, diarrhea, bradycardia, ventricular arrhythmias, atrioventricular block, insomnia, depression and confusion.

Contraindications and Precautions

| Contraindications: Hypersensitivity | | |
|-------------------------------------|--|--|
| | | |
| | | |
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| Interactions |
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| IIICIacionis |

Antacids and cholestyramine decrease its absorption. Adverse effects increase with medications that cause hypokalemia (amphotericin B, prednisone). With calcium salts it can cause serious arrhythmias.

ENALAPRIL

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|---------------------------------|--|
| 010.000.2501.00 | CAPSULE OR TABLET Each capsule or tablet contains: Enalapril maleate 10 mg. Package with 30 capsules or tablets. | Arterial hypertension systemic. | Oral. Adults: Initial: 10 mg per day and adjust according to response. |
| | | | Usual dose: 10 to 40 mg per day. |

Generalities

They inhibit angiotensin-converting enzyme, which prevents the formation of angiotensin II from angiotensin.

Risk in Pregnancy

d

Headache, dizziness, insomnia, nausea, diarrhea, rash, angioedema and agranulocytosis.

Contraindications and Precautions

Adverse effects

Contraindications: Hypersensitivity to the drug.

Precautions: In patients with kidney damage, diabetes, heart failure and vascular disease.

| Interactions |
|--------------|
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Its effect decreases with non-steroidal anti-inflammatory drugs, metal poisoning can occur with lithium, and potassium supplements increase the risk of hyperkalemia.

EPINEPHRINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|---|---|
| | INJECTABLE SOLUTION | Anaphylactic shock. | Subcutaneous or intramuscular. |
| 010.000.0611.00 | Each vial contains: Epinephrine 1 mg (1:1,000). Container with 50 vials with 1 mL. | Heart attack. Capillary hemorrhage. Bronchospasm. | Slow intravenous (5 to 10 minutes). Adults: Intravenous: 0.1 to 0.25 mg. Subcutaneous or intramuscular: 0.1 to 0.5 mg. |
| | | | Children: Subcutaneous: 0.01 mg/kg body weight or 0.3 mg/m2 body surface. Infusion: 0.1 to 1.5 µg/kg body weight. Do not exceed 0.5 mg. Administer diluted in intravenous solutions packaged in glass bottles. |

Generalities

It stimulates the ÿ and ÿ adrenergic receptors of the sympathetic nervous system.

| Risk in Preg | gnancy | : | |
|---------------------|---|--|--|
| | nsion, cardiac arrhythmias, anxiety Ilmonary edema, local necrosis at | | ycardia, angina pectoris, hyperglycemia, |
| shock other than | s: Cerebral vascular insufficiency, | erthyroidism. In labor and in va | ogenated hydrocarbons, coronary insufficiency scular endings (fingers, ears, nose and penis) |
| | ressants, antihistamines and levot nias; adrenergic blockers antagoni | | oncomitant use with digitalis can precipitate |
| ELODIPINE L Clue | 3B | Indications | 1 |
| Citte | Description RELEASE TABLET PROLONGED Each tablet contains: Felodipine 5 mg. | Indications Angina pectoris Systemic arterial hypertension. Congestive heart failure. | Route of administration and dosage Oral. Adults: 5 to 10 mg/day. |
| 010.000.2114.00 | Package with 10 prolonged release tablets. | Congestive neart failure. | Maximum 20 mg/day. |
| Calcium channe | I blocker with vascular selectivity of | Generalities compared to myocardial selecti | vity. |
| Risk in Pre | gnancy | ; | |

Contraindications and Precautions

Adverse effects

Due to its arteriolar vasodilator effect: Nausea, dizziness, headache, flushing, arterial hypotension. Other effects:

Contraindications: Cardiogenic shock, atrioventricular block, arterial hypotension, asthma and concomitant with beta blockers.

Interactions

Hypotension and heart failure are favored with beta blockers. Enzymatic inducers favor its biotransformation.

HYDRALAZINE

Constipation and edema.

| Route of administration and dosage |
|--|
| Oral. |
| Start with 10 mg daily every 6 or 12 hours, the dose can |
| be increased to 150 mg/day according to therapeutic |
| response. |
| |
| |
| Children: |
| 0.75 to 1 mg/kg body weight/day, divided into 4 doses. |
| |
| Maximum dose: 4.0 mg/kg body weight/day. |
| Children: 0.75 to 1 mg/kg body |

| Intramuscular or slow intravenous. Adults: 20 to 40 mg. Eclampsia: 5 to 10 mg every 20 minutes, if there is no effect with 20 mg, use another antihypertensive. Generalities Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy C Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions Increases the response of antihypertensives. | 28 | | | | | |
|---|-------------------|--|----------------------------------|--|--|--|
| Hydralazine Hydrochloride 20 mg. Container with 5 vials or 5 vials with 1.0 mL. Generalities Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy C Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | INJECTABLE SOLUTION | | Intramuscular or slow intravenous. | | |
| Hydralazine Hydrochloride 20 mg. Container with 5 vials or 5 vials with 1.0 mL. Generalities Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy C Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | Each vial or vial contains: | | | | |
| Generalities Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy c Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | Hydralazine Hydrochloride 20 mg. | | Eclampsia: 5 to 10 mg every 20 minutes, if there is no | | |
| Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy C Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | 010.000.4201.00 | Container with 5 vials or 5 vials with 1.0 mL. | | effect with 20 mg, use another antinypertensive. | | |
| Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy C Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | | | | | |
| Relaxes the smooth muscle of arterioles producing hypotension and reflex cardiac stimulation. Risk in Pregnancy C Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | · | V0 | 1 | | |
| Risk in Pregnancy Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | | Generalities | | | |
| Adverse effects Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | Relaxes the smoo | oth muscle of arterioles producing h | ypotension and reflex cardiac s | timulation. | | |
| Headache, tachycardia, angina pectoris, hot flashes, generalized lupus erythematosus, anorexia, nausea, tinnitus, nasal congestion, lacrimation, conjunctivitis, paresthesias and edema. Contraindications and Precautions Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | Risk in Pregr | nancy c | | | | |
| Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | | Adverse effects | | | |
| Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | | | sus, anorexia, nausea, tinnitus, nasal | | |
| Contraindications: Hypersensitivity to the drug; heart and coronary failure, dissecting aortic aneurysm and mitral valve disease. Interactions | | | | | | |
| disease. Interactions | | Contrain | dications and Precautions | | | |
| Interactions | | : Hypersensitivity to the drug; heart | and coronary failure, dissecting | g aortic aneurysm and mitral valve | | |
| Increases the response of antihypertensives. | | | Interactions | | | |
| | Increases the res | ponse of antihypertensives. | | • | | |

ISOSORBIDE

coronary flow.

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|-------------------------------------|------------------------|--|
| | SUBLINGUAL TABLET | Angina pectoris. | Sublingual. |
| | Each tablet contains: | Chronic ischemic heart | Adults: |
| | Isosorbide dinitrate 5 mg. | disease. | 2.5 to 10 mg, repeat every 5 to 15 minutes |
| 010.000.0592.00 | Package with 20 sublingual tablets. | Heart failure. | (maximum 3 doses in 30 minutes). |
| | TABLET | | Oral |
| | Each tablet contains: | | Adults: |
| | Isosorbide dinitrate 10 mg. | | 5 to 30 mg every six hours. |
| 010.000.0593.00 | Package with 20 tablets. | | Heart failure: 20 to 40 mg every 4 hours. |

Generalities

Nitrate that reduces the requirement and increases the supply of oxygen to the myocardium. Vasodilation increases

| Risk in Pregnancy | С |
|--|--|
| | Adverse effects |
| Tachycardia, dizziness, orthostatic hypotensic | on, headache, restlessness, vomiting and nausea. |
| | Contraindications and Precautions |

Contraindications: Arterial hypotension, anemia, head trauma, and liver or kidney dysfunction.

Interactions

With antihypertensives, opiates and ethyl alcohol, hypotension increases. Adrenergic medications decrease its antianginal effect.

METOPROLOL

| 1 | Clue | Description | Indications | Route of administration and dosage |
|---|------|-----------------------------|---|------------------------------------|
| | | TABLET | Mild or moderate arterial hypertension. | Oral. |
| 1 | | Each tablet contains: | | Adults: |
| 1 | | Metoprolol tartrate 100 mg. | Prophylaxis in myocardial | |
| ı | | | ischemic disease. | 100 to 400 mg every 8 or 12 hours. |

| 010.000.0572.00 Container with 20 tablets. | | Prophylaxis: 100 mg every 12 hours. | | |
|--|--|---|--|--|
| | Generalities |] | | |
| Cardioselective antagonist, which blocks the b | beta one receptor and produces a decre | ease in myocardial activity. | | |
| Risk in Pregnancy | b | | | |
| | Adverse effects |] | | |
| Arterial hypotension, bradycardia, nausea, vomiting, abdominal pain, fatigue, depression, diarrhea and headache. | | | | |
| - | | 1 | | |
| (| Contraindications and Precautions | | | |
| Contraindications: Drug hypersensitivity, delay in atriove | entricular conduction, heart failure and myocardia | al infarction. | | |
| Precautions: In obstructive airway conditions and liver cirrhosis. | | | | |
| | Interactions |] | | |
| Bradycardia and depression of myocardial activity with o | digitalis. Verapamil or chlorpromazine decrease | its hepatic biotransformation. Indomethacin reduces | | |

NIFEDIPINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|----------------------------------|--|
| | SOFT GELATIN CAPSULE | Angina pectoris. | Oral. |
| | Each capsule contains: Nifedipine 10 mg. | Essential arterial hypertension. | Adults: |
| | | | 30 to 90 mg/day, divided into three |
| 010.000.0597.00 | Container with 20 capsules. | | Tomas. Increase the dose in periods of 7 to 14 days until the effect is achieved wanted. |
| | | | Maximum dose 120 mg/day. |
| | RELEASE TABLET | | Oral. |
| | PROLONGED | | |
| | | | Adults: |
| | Each tablet contains: Nifedipine | | |
| | 30 mg. | | 30 mg every 24 hours, maximum dose 60 |
| 010.000.0599.00 | Package with 30 tablets. | | mg/day. |

Generalities

Calcium channel blocker in cardiac and smooth muscle.

Risk in Pregnancy c

Adverse effects

the hypotensive effect. Rifampicin and phenobarbital increase its biotransformation.

Nausea, dizziness, headache, flushing, hypotension, constipation and edema.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, cardiogenic shock, atrioventricular block, arterial hypotension, asthma and beta blockers.

Precautions: In altered liver function.

Interactions

With beta blockers hypotension and heart failure are favored, ranitidine decreases its biotransformation and with grapefruit juice it can increase its hypotensive effect, with diltiazem it decreases its clearance and phenytoin decreases its bioavailability.

PENTOXYFYLLINE

| Clue | Description | Indications | Route of administration and dosage |
|------|---------------------------------|----------------------------|------------------------------------|
| | TABLET OR DRAGEEE | Intermittent claudication. | Oral. |
| | EXTENDED RELEASE | | |
| | | Peripheral vascular | Adults: |
| | Each tablet or dragee contains: | insufficiency. | |

| 010.000.4117.00 | Pentoxifylline 400 mg. Package with 30 tablets or dragees. | | Cerebrovascular insufficiency. | 400 mg every eight or twelve hours. | | |
|--|--|--|--------------------------------|-------------------------------------|--|--|
| Generalities Methylxanthine derivative that reduces blood viscosity and gives flexibility to the erythrocyte, thereby improving capillary blood flow. | | | | | | |
| Risk in Pregnancy c | | | | | | |
| Adverse effects Headache, dizziness, nausea, vomiting and gastrointestinal pain. | | | | | | |
| Contraindications and Precautions | | | | | | |
| Contraindications: Hypersensitivity to caffeine, theophylline and theobromine, cerebral hemorrhage and breastfeeding. Precautions: In cardiac arrhythmias, arterial hypotension, myocardial infarction and renal failure. | | | | | | |
| | | | Interactions |] | | |
| Increases the effect | Increases the effect of antihypertensives, anticoagulants and insulin. | | | | | |

POTASSIUM, SALTS

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|----------------------|---|
| | SOLUBLE TABLET OR EFFERVESCENT | Hypokalemia. | Oral. |
| | Each tablet contains: Potassium Bicarbonate 766 mg. Potassium Bitartrate 460 mg. Citric Acid 155 mg. | Digitalis poisoning. | Adults: One to two tablets dissolved in 180 to 240 mL of water every 8 to 24 hours. The total daily dose should not exceed |
| 010.000.0523.00 | Container with 50 soluble tablets. | | 150 mEq. Children: 25 mEq/day, divided every 6 hours. |
| | | | The total daily dose should not exceed 3 mEq/kg body weight. Each tablet provides 10 mEq = 390 mg of potassium. |
| | | | Zasi. asis, provides 15 m2q = 600 mg or potassium. |

Generalities

Electrolyte essential for cardiac function and reduces the digitalis-enzyme association in digitalis poisoning.

Risk in Pregnancy

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Adverse effects

Cardiac arrhythmias, nausea, vomiting and abdominal pain. Paresthesias, mental confusion. Diluted in quantities less than

180 mL of water causes gastrointestinal irritation.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, renal failure, Addison's disease, acute dehydration, hyperkalemia and cardiac disorders.

Precautions: In heart disease, kidney disease or acidosis.

Interactions

Reduces the risk of hypokalemia in patients receiving diuretics and corticosteroids. With anticholinergics, gastrointestinal irritation increases. Hyperkalemia is favored with potassium-sparing diuretics.

PROPRANOLOL

| Clue | Description | Indications | Route of administration and dosage |
|------|-------------|-------------|------------------------------------|
| | TABLET | | Oral. |

| | Each tablet contains: Propranolol Hydrochloride 40 mg. | Systemic arterial hypertension. | Adults: |
|-----------------|--|---|--|
| 010.000.0530.00 | Package with 30 tablets. | Angina pectoris. Migraine prophylaxis. | Antihypertensive: 40 mg every 12 hours. Antiarrhythmic, hyperthyroidism pheochromocytoma: |
| | TABLET | | 10 to 80 mg every 6 to 8 hours. |
| | Each tablet contains: | Supraventricular arrhythmia. | Antianginal: 180 to 240 mg divided into three or four doses. |
| | Propranolol Hydrochloride 10 mg | Portal hypertension. | Migraine: 80 mg every 8 to 12 hours. |
| 010.000.0539.00 | Package with 30 tablets. | Pheochromocytoma. | Children: |
| | | | Antihypertensive: 1 to 5 mg/kg/day, every 6 to 12 hours. |
| | | | Antiarrhythmic, hyperthyroidism and pheochromocytoma: |
| | | | 0.5 to 5 mg/kg body weight/day, divided dose every 6 to 8 hours. |
| | | | Migraine: children under 35 kg 10 to 20 mg every 8 hours, over 35 kg; 20 to 40 mg every 8 hours. |

Generalities

ÿ adrenergic antagonist that reduces cardiac oxygen demand, heart rate, blood pressure and muscle tremor.

| Risk in Pregnancy C | | | | |
|---|-----|--|--|--|
| Adverse effects | | | | |
| Adverse effects | | | | |
| Bradycardia, hypotension, constipation, fatigue, depression, insomnia, hallucinations, hypoglycemia, bronchospa | sm, | | | |
| hypersensitivity. Abrupt withdrawal of the medication can cause angina pectoris or myocardial infarction. | | | | |
| | | | | |
| Contraindications and Precautions | | | | |
| Contraindications: Hypersensitivity to the drug, heart failure, asthma, atrioventricular conduction delay, bradycardia, | | | | |
| diabetes, Reynaud's syndrome and hypoglycemia. | | | | |
| Precautions: In kidney or liver failure. | | | | |

With anesthetics, digitalis or antiarrhythmics, bradycardia increases. Bradycardia is antagonized with anticholinergics. Non-steroidal anti-inflammatories block the hypotensive effect. Increases the muscle relaxing effect of pancuronium and vecuronium.

Interactions

GLYCERYL TRINITRATE

| • | DETOLINE TRIBUTION IL | | | | |
|---|-----------------------|---|------------------------|--|--|
| | Clue | Description | Indications | Route of administration and dosage | |
| | | CAPSULE OR TABLET | Angina pectoris. | Oral or subingual. | |
| | | CHEWABLE | | | |
| | | | Chronic ischemic heart | Adults: | |
| | | Each capsule or chewable tablet contains: | disease. | | |
| | | | Heart failure. | 0.8 mg that can be repeated after 5 or 10 minutes. | |
| | | Glycerol Trinitrate 0.8 mg. | rieart failure. | | |
| | 010.000.0591.00 | Package with 24 chewable capsules or tablets. | | | |
| | | ackage with 24 one wable capsules of tablets. | | | |
| | | | | | |
| | | | | | |

Generalities

Nitrate that reduces the requirement and increases the supply of oxygen to the myocardium. Vasodilation increases coronary flow.

| Risk in Pregnancy | С |
|-------------------|-----------------|
| | Adverse effects |

Headache, tachycardia, hypotension and dizziness.

Contraindications and Precautions

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|------|----------------------------------|--|
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| | Interactions | |

With antihypertensives, opiates and ethyl alcohol, hypotension increases. Adrenergic medications decrease its antianginal effect.

ACETYLSALICYLIC ACID/ ATORVASTATIN/ RAMIPRIL

Contraindications: Hypersensitivity to the drug, arterial hypotension, head trauma, cardiomyopathy and anemia

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|---------------------------------------|------------------------------------|
| | CAPSULES | Treatment of hypertension and | Oral. |
| | | dyslipidemia, secondary prevention of | |
| | Each Capsule contains: Acid | cardiovascular events. | 1 capsule a day after food |
| | acetylsalicylic acid 100 mg Atorvastatin calciu | m | |
| | trihydrate 40 mg Ramipril 5 mg | | |
| 010.000.6242.00 | Box with 28 Capsules | | |

Generalities

Atorvastaine: competitively inhibits HMG-CoA reductase, an enzyme that limits the rate of cholesterol biosynthesis, and inhibits cholesterol synthesis in the liver.

Acetylsalicylic acid: inhibits the synthesis of prostaglandins, which prevents the stimulation of pain receptors by bradykinin and other substances. Irreversible antiplatelet effect. Ramipril is an ACE inhibitor,

generating reduced concentrations of angiotensin II, which induces a decrease in vasopressor activity and reduction in aldosterone secretion

| Risk in Pregnancy |
|-------------------|
|-------------------|

X (Contraindicated in pregnancy).

| Adverse effects | |
|-----------------|--|
| Adverse effects | |

Gastrointestinal discomfort such as heartburn, nausea, vomiting, stomach pain and diarrhea. Minor gastrointestinal bleeding (microhemorrhage).

| Contraindications and Precautions | |
|-----------------------------------|--|
| Cultianiucations and recautions | |

Contraindicated in severe renal failure and hemodialysis. Caution in renal failure if Clcr is ÿ 60 mL/min, max daily dose. of ramipril: 10 mg. If Clcr 30-60 mL/min, max daily dose. of ramipril: 5 mg. Hypersensitivity to acetylsalicylic acid, atorvastatin, ramipril, other salicylates, NSAIDs, any other ACEI. History of asthma attack or other allergic reaction to salicylic acid and other non-steroidal analgesics/anti-inflammatory drugs. Active recurrent peptic ulcer or history and/or gastric/intestinal bleeding, or other types of bleeding such as cerebrovascular hemorrhages. Hemophilia and other bleeding disorders. Severe IH and IR. Patients on hemodialysis.

Severe heart failure. Concomitant with methotrexate in weekly doses ÿ 15 mg. Concomitant with aliskiren is contraindicated in diabetes mellitus or IR (GFR < 60 mL/min/1.73 m 2). Nasal polyps associated with asthma induced or exacerbated by ASA. Active liver disease or persistent unexplained elevations in serum transaminases exceeding 3 times the ULN. Pregnancy and lactation and in women of childbearing age who do not use reliable contraceptive methods. Concomitant with tipranavir, ritonavir or cyclosporine, due to the risk of rhabdomyolysis. History of angioedema (hereditary, idiopathic, or due to previous angioedema with ACE inhibitors or angiotensin II receptor antagonists. Extracorporeal treatments involving contact of blood with negatively charged surfaces. Significant bilateral renal artery stenosis or arterial stenosis renal in only one functioning kidney. Ramipril should not be administered to hypotensive or hemodynamically unstable patients. Children and adolescents < 18 years. In children < 16 years of age with fever, flu or chickenpox, there is a risk of Reye's Syndrome.

| -1 | |
|-----|--------------|
| - 1 | Interactions |
| - 1 | Interactions |

Due to acetylsalicylic acid: Prolongation of clotting time with: ticlopidine, clopidogrel. Risk of bleeding increased with: NSAIDs, systemic glucocorticosteroids (except hydrocortisone as replacement treatment in Addison's disease), alcohol, anticoagulants, thrombolytics Risk of acute kidney failure with: diuretics, ACE inhibitors, ARBs. Plasma concentrations increased with: uricosurics

Increases nephrotoxicity of: cyclosporine. Increases the effect of: insulin and sulfonylureas.

Reduces the effect of: alpha interferon, beta-blocking antihypertensives, uricosurics (probenecid and sulfinpyrazone), ACEI, ARB. Increases risk of ototoxicity from: vancomycin. Increases plasma concentrations of: barbiturates, digoxin, phenytoin, lithium, zidovudine, valproic acid, methotrexate (do not combine with methotrexate at doses 15 mg/wk or higher and at low doses, monitor blood count and kidney function).

Enhances the action and toxicity of: acetazolamide. Renal elimination increased by: antacids. Plasma concentrations increased by: uricosurics.

Toxicity enhanced by: cimetidine, ranitidine, zidovudine. Due to atorvastatin:

Plasma levels increased by: strong CYP3A4 inhibitors (e.g. cyclosporine, telithromycin, clarithromycin, delavirdine, stiripentol, ketoconazole, voriconazole, itraconazole, posaconazole and HIV protease inhibitors such as

ritonavir, lopinavir, atazanavir, indinavir, darunavir, etc.); moderate CYP3A4 inhibitors (e.g., erythromycin, diltiazem, verapamil, and fluconazole), grapefruit juice, cyclosporine. Plasma levels decreased by: cytochrome P450 3A4 inducers (e.g., efavirenz, rifampicin, St. John's wort). Risk of rhabdomyolysis with: gemfibrozil/fibric acid derivatives, ezetimibe, fusidic acid. Risk of myopathy with colchicine. Increases plasma concentrations of: norethindrone and ethinyl estradiol, digoxin. Due to ramipril: Extracorporeal treatments that involve blood contact with negatively charged surfaces, such as dialysis or hemofiltration with certain high-flux membranes and low-density lipoprotein apheresis with dextran sulfate, are contraindicated due to the increased risk of reactions. severe anaphylactoids. Potentiation of hypotension with: diuretics, nitrates, tricyclic antidepressants, anesthetics. Antihypertensive effect reduced by: sympathomimetic vasopressors, NSAIDs, isoproterenol, dobutamine, dopamine, epinephrine.

Increased alterations in blood count with: allopurinol, immunosuppressants, corticosteroids. Increases toxicity of: lithium. Increases hypoglycemic effect of: insulin and sulfonylurea derivatives. Increased risk of hyperkalemia: potassium salts, heparin, potassium-sparing diuretics, angiotensin II antagonists, trimethoprim, tacrolimus. Increased risk of hypotension with: antihypertensives (e.g., diuretics) nitrates, tricyclic antidepressants, anesthetics, acute alcohol ingestion, baclofen, alfuzosin, doxazosin, prazosin, tamsulosin, terazosin

ACETYLSALICYLIC ACID. SIMVASTATIN. RAMIPRIL

| I | Clue | Description | Indications | Route of administration and dosage |
|---|-----------------|-----------------------------|-------------------------|------------------------------------|
| ſ | | CAPSULE | Secondary prevention of | Oral. |
| ı | | | cardiovascular events. | Adults: |
| ı | | Each capsule contains: | | One capsule every 24 hours. |
| ı | | Acetylsalicylic acid 100 mg | | |
| ı | | Simvastatin 40 mg | | |
| ı | | Ramipril 5 mg | | |
| | 010.000.6049.00 | Container with 28 capsules. | | |

Generalities

Acetylsalicylic acid has an antiplatelet effect by inhibiting the enzyme thromboxane synthetase, simvastatin is an inactive lactone that in vivo is rapidly transformed by hydrolysis into the corresponding b-hydroxy acid which is a potent inhibitor of HMG-CoA reductase. They inhibit the angiotensin-converting enzyme, which prevents the formation of angiotensin II from angiotensin I.

| Risk in Pregnancy |] |
|-------------------|---|
|-------------------|---|

Adverse effects

Heartburn, nausea, vomiting, gastralgia, diarrhea and mild gastrointestinal bleeding.

Contraindications and Precautions

Contraindications: Hypersensitivity to drugs

Precautions: Hypersensitivity to other analgesics/anti-inflammatories/antirheumatics or to other allergens. Other known allergies (skin reactions, pruritus, urticaria), bronchial asthma, allergic rhinitis, inflammation of the nasal mucous membranes (adenoid hyperplasia) and other chronic respiratory diseases. Concomitant treatment with anticoagulants. Patients with a history of gastric or intestinal ulcers or gastrointestinal bleeding. Patients with liver or kidney dysfunction. Patients at risk of hyperuricemia. Low doses of acetylsalicylic acid reduce the elimination of uric acid, which can trigger a gout attack.

Interactions

Strong CYP3A4 inhibitors, gemfibrozil, cyclosporine, danazol, amiodarone, verapamil.

ADFNOSINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|-------------------------------------|-----------------------------|---|
| | INJECTABLE SOLUTION | Paroxysmal supraventricular | Intravenous. |
| | Foot vial contains: Adonosins 6 mg | tachycardia. | Adults: |
| | Each vial contains: Adenosine 6 mg. | | I |
| | | | 3 to 6 mg, if there is no response administer 6 to 12 mg. |
| 010.000.5099.00 | Container with 6 vials with 2 ml. | | |
| | Container with a viala with 2 life. | | Children: |
| | | | 0.05 mg/kg body weight, a maximum dose of 0.25 mg/kg body weight can be administered. |
| | | | |
| | | | |

| | Generalities | | | |
|--|--|---------------|--|--|
| Endogenous purine nucleotide that causes a profound depression in atrioventricular conduction without producing a negative inotropic effect. | | | | |
| Risk in Pregnancy | С | | | |
| | Adverse effects | | | |
| Dyspnea, facial flushing, chest pain, hypo | otension, nausea, anxiety. | | | |
| | Contraindications and Precautions | | | |
| Contraindications: Hypersensitivity to the drug, atrial fluter, sick sinus syndrome and bronchial asthma. | | | | |
| Ī | Interactions | | | |
| Dipyridamole enhances its effects. Carba | mazepine and methylxanthines antagoniz | e its effect. | | |

ALPROSTADIL

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|-----------------------------------|--|--|
| | INJECTABLE SOLUTION | Treatment of the disease | Intravenous. |
| | | peripheral arterial occlusion, | |
| | Each vial with | stages III and IV when surgery is | Adults: |
| | lyophilized or solution contains: | contraindicated. | 40 μg twice a day. |
| | Alprostadil 20 μg. | | |
| 010.000.5631.00 | Container with a vial. | | |
| | INJECTABLE SOLUTION | Treatment of of the Congenital | Intravenous. |
| | Each vial contains: Alprostadil | Cardiovascular Malformations in which | Start with 50 – 100 ng of alprostadil/kg/min |
| | 500 µg. | it is necessary to maintain the ductus | |
| 010.000.6051.00 | Container with 5 vials with | arteriosus persistent, while definitive surgical correction is performed. Such | |
| 010.000.0001.00 | 1 mL each (500 µg/mL). | as: | |
| | 1 m2 sasn (555 pg/m2). | | |
| | | - Malformations with restricted | |
| | | pulmonary blood flow such as: atresia | |
| | | nulmanani atanasia | |
| | | pulmonary, stenosis pulmonary, tricuspid atresia, tetralogy | |
| | | of Fallot. | |
| | | - Malformations with restricted systemic | |
| | | blood flow such as: coarctation of the | |
| | | aorta, interruption of the aortic arch | |
| | | with valvular stenosis or atresia of the left heart. | |
| | | ion noun | |
| | | - Transposition of the | |
| | | large vessels with or without other defects. | |

Alprostadil is a prostaglandin EI (PGEI), whose most notable pharmacological action is the vasodilator and antiplatelet effect, by relaxing the arteries and pre-capillary sphincters, improving the flexibility of erythrocytes and inhibiting their aggregation. It also reduces thrombocytogenesis, fibrin and lipid deposition, improves microcirculation by increasing oxygen and glucose supplements, and allows the use of these substrates by ischemic tissues.

Risk in Pregnancy

C

Generalities

Apnea, fever, flushing, hypotension, bradycardia, tachycardia, diarrhea and muscle cramps or spasms.

Contraindications and Precautions

Adverse effects

Contraindications: Hypersensitivity to the drug. Respiratory stress syndrome, permanence of the spontaneous ductus arteriosus open. Patients with uncontrolled cardiac arrhythmias and coronary artery disease. Myocardial infarction or cerebral vascular disease diagnosed within 6 months prior to the start of therapy. Patients with suspected pulmonary edema based on clinical or radiological findings (e.g. pulmonary infiltrations) and in severe cases of chronic obstructive respiratory disease.

| Precautions: Patients with signs of acute liver damage | (elevated transaminases or ga | mma TG activity) and in subjects in |
|--|-----------------------------------|-------------------------------------|
| whom bleeding complications are anticipated (acute ga | stritis or gastric or duodenal ul | cer). |

Interactions

Simultaneous administration with drugs with hematological potential (anticoagulants, coumaric derivatives, heparin, platelet and thrombocyte aggregation inhibitors) may increase the risk of bleeding. Simultaneous administration with antibiotics from the cephalosporin group (cefamandole, cefoperazone) or moxalactam may alter coagulation factors. Simultaneous administration with alpha sympathomimetics (mataraminol, epinephrine, phenylephrine) reduces the vasodilatory activity of alprostadil 500 µg. With vasodilators and diuretics it can cause hypotension.

ALTEPLASA

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|-------------------------------------|---|
| | INJECTABLE SOLUTION | Acute infarction of the myocardium. | Intravenous: bolus followed by infusion. |
| | Each vial with lyophilisate contains: | Pulmonary embolism. | Acute myocardial infarction (first 6 hours). |
| | Alteplase (human tissue plasminogen activator) 50 mg. | Cerebral vascular event. | Adults: |
| 010.000.5107.00 | Package with 2 vials with lyophilisate, 2 vials with solvent and sterilized equipment for reconstitution. | | 15 mg bolus and then 50 mg infusion over 30 minutes, followed by 35 mg infusion over 60 minutes (maximum 100 mg). |
| | | | In patients with body weight <65 kg administer 1.5 mg/ kg body weight. |

Medication obtained by genetic engineering, identical to the human tissue plasminogen activator, so it is devoid of immune activity, with biochemical and kinetic characteristics comparable to those of the natural enzyme; It causes rapid vascular repermeabilization that leads to the preservation of ventricular function.

Generalities

| Risk in Pregnancy | X |
|-------------------|-----------------|
| | Adverse effects |

Superficial or internal bleeding, cardiac arrhythmias, embolization of cholesterol crystals, thrombotic embolization, nausea, vomiting, anaphylactoid reactions, arterial hypotension, hyperthermia and bronchospasm.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, treatment with anticoagulants, hemorrhagic diathesis, active or recent hemorrhage, history of recent hemorrhagic stroke, severe or uncontrolled arterial hypertension, bacterial endocarditis or pericarditis, acute pancreatitis or peptic ulcer in the last three months, esophageal varices and arterial aneurysms.

Precautions: in case of bleeding, arrhythmias, middle cerebral embolism.

Interactions

The prior or simultaneous administration of anticoagulants and platelet aggregation inhibitors increases the risk of bleeding.

AMIODARONE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------------------|-----------------------------------|--|
| | INJECTABLE SOLUTION | Cardiac arrhythmias. | Slow intravenous infusion (20-120 minutes) |
| | Each vial contains: hydrochloride | Wolff-Parkinson-White syndrome. | Intravenous injection (1-3 minutes). Adults: |
| | amiodarone 150 mg. | Bradycardia-tachycardia syndrome. | Intravenous injection 5 mg/kg body weight. Loading dose: 5 mg/kg body weight in 250 mL of 5% glucose solution, in slow intravenous infusion. |
| 010.000.4107.00 | Container with 6 vials of 3 mL. | Coronary insufficiency. | Administer diluted in intravenous solutions packaged in glass |
| | TABLET | | bottles. Oral. |

| | | | | _ |
|---|--|--|--|--------------|
| 010.000.4110.00 | Each tablet contains: hydrochloride amiodarone 200 mg. Package with 20 tablets. | | Adults: Loading dose: 200 to 400 mg every 8 hours for two to three weeks. Support: 100 to 400 mg/day, for five days a week. Children: 10-15 mg/kg body weight/day for 4 to 14 days. Support: 5 mg/kg body weight/day, divided every 8 hours. | |
| | | | | |
| Potossium sharr | el blocker that prolongs the action | Generalities | cos repolarization | |
| rotassium chann | er blocker that prolongs the action | n potential and decreas | ses repularization. | |
| Risk in Pregr | nancy | d | | |
| | | Adverse effects | | |
| Nausea, vomiting | , photosensitivity, corneal micro | | alveolitis, pulmonary fibrosis, fatigue, headache. | |
| | Cont | raindications and Preca | autions | |
| Contraindications: Hyp | persensitivity to the drug, heart failure, ca | ardiac conduction disorders, b | oradycardia. | |
| | | | ction and serum potassium levels. Sun exposure of surgical intervention, the anesthesiologist must b | e |
| | *** | Interactions | | |
| | effect is increased with antihype ium antagonists. Increases the a | | e depressant effects on the myocardium with ÿ | |
| | | | | |
| MI ODIPINE | /VALSARTAN/HYDR | OCHLOROTHIA | AZIDE | |
| No. | /VALSARTAN/HYDR | OCHLOROTHIA Indications f | , | |
| AMLODIPINE, | /VALSARTAN/HYDR | Indications f | for Route of administration and dosage Oral. | |
| No. | Description | Indications f | for Route of administration and dosage Oral. | |
| No. | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to | Indications for the treatment of Arterial Hypertension | for Route of administration and dosage Oral. a not controlled sive drugs Adults: | |
| No. | Description COMPRESSED Each tablet contains: | the treatment of Arterial Hypertension with two antihyperten | for Route of administration and dosage Oral. a not controlled sive drugs Adults: | |
| No. | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan | the treatment of Arterial Hypertension with two antihyperten | for Route of administration and dosage Oral. a not controlled sive drugs Adults: | |
| No. | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. | the treatment of Arterial Hypertension with two antihyperten | for Route of administration and dosage Oral. a not controlled sive drugs Adults: | |
| Clue | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. | Indications I the treatment of Arterial Hypertension with two antihyperten and requiring 3 drugs | for Route of administration and dosage Oral. a not controlled sive drugs Adults: | |
| Clue 010.000.5800.00 | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. | Indications I the treatment of Arterial Hypertension with two antihyperten and requiring 3 drugs | for Route of administration and dosage Oral. Adults: 1 tablet every 24 hours. | |
| Valsartan/AmLod to control blood p channel blockers, diuretic. It is indic | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. ipine/Hydrochlorothiazide combinessure in patients with systemic, Valsartan, a member of the clasated in patients whose blood preserved. | Indications I the treatment of Arterial Hypertension with two antihyperten and requiring 3 drugs Generalities nes three antihypertens arterial hypertension: A s of angiotensin II rece ssure is not adequately | for Route of administration and dosage Oral. a not controlled sive drugs Adults: | ent |
| Valsartan/AmLod to control blood p channel blockers, diuretic. It is indic | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. pipine/Hydrochlorothiazide combinessure in patients with systemic Valsartan, a member of the clasated in patients whose blood pressure scurrently receiving AmLodipine | Indications I the treatment of Arterial Hypertension with two antihyperten and requiring 3 drugs Generalities nes three antihypertens arterial hypertension: A s of angiotensin II rece ssure is not adequately | oral. Adults: 1 tablet every 24 hours. Sive compounds that act in a complementary mann AmLodipine, which belongs to the class of calcium exptor blockers and Hydrochlorothiazide a thiazide or controlled in combination therapy or as replacementary or as replace | ent |
| Valsartan/AmLod to control blood p channel blockers, diuretic. It is indic therapy in patient | Description COMPRESSED Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. pipine/Hydrochlorothiazide combinessure in patients with systemic Valsartan, a member of the clasated in patients whose blood pressure scurrently receiving AmLodipine | Generalities Generalities res three antihypertension: arterial hypertension with two antihyperten and requiring 3 drugs Generalities res three antihypertension: a arterial hypertension: s of angiotensin II rece ssure is not adequately y, Valsartan and Hydroc | oral. Adults: 1 tablet every 24 hours. Sive compounds that act in a complementary mann AmLodipine, which belongs to the class of calcium exptor blockers and Hydrochlorothiazide a thiazide or controlled in combination therapy or as replacementary or as replace | ent |
| Valsartan/AmLod to control blood p channel blockers, diuretic. It is indic therapy in patient Risk in Pregr | Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. ipine/Hydrochlorothiazide combinessure in patients with systemic, Valsartan, a member of the clastated in patients whose blood pressurently receiving AmLodipinessure. | Generalities Ge | Oral. Adults: 1 tablet every 24 hours. Sive compounds that act in a complementary mann AmLodipine, which belongs to the class of calcium aptor blockers and Hydrochlorothiazide a thiazide of controlled in combination therapy or as replacementary the same dose of the individual tale and the same dose of the individual tale edema, edema, fatigue, facial redness, asthenia, ugh, pharyngeal pain, diarrhea, nausea, abdominal | ent blets |
| Valsartan/AmLod to control blood p channel blockers, diuretic. It is indic therapy in patient Risk in Pregr The most frequer dyspepsia, vertige pain, constipation Known hypersens severe alteration | Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. ipine/Hydrochlorothiazide combinessure in patients with systemic, Valsartan, a member of the classated in patients whose blood pressurently receiving AmLodipiness currently receiving AmLodipiness currently receiving AmLodipiness, tachycardia, palpitations, orthous, dry mouth, rash, erythema, joir | Generalities Ge | Oral. Adults: 1 tablet every 24 hours. Sive compounds that act in a complementary mann AmLodipine, which belongs to the class of calcium eptor blockers and Hydrochlorothiazide a thiazide y controlled in combination therapy or as replacementary chlorothiazide at the same dose of the individual tale edema, edema, fatigue, facial redness, asthenia, ugh, pharyngeal pain, diarrhea, nausea, abdominal ext pain, arthralgia. | ent blets |
| Valsartan/AmLod to control blood p channel blockers, diuretic. It is indic therapy in patient Risk in Pregr The most frequer dyspepsia, vertige pain, constipation Known hypersens severe alteration | Each tablet contains: AmLodipine besylate equivalent to 5 mg AmLodipine Valsartan 160 mg. Hydrochlorothiazide 12.5 mg. Package with 28 tablets. ipine/Hydrochlorothiazide combinessure in patients with systemic, Valsartan, a member of the classated in patients whose blood pressurently receiving AmLodipinessure in patients, valsartan, a member of the classated in patients whose blood pressurently receiving AmLodipinessure in patients, and patients, | Generalities Ge | Oral. Adults: 1 tablet every 24 hours. Sive compounds that act in a complementary mann AmLodipine, which belongs to the class of calcium eptor blockers and Hydrochlorothiazide a thiazide y controlled in combination therapy or as replacementary controlled in combination therapy or as replacementary the same dose of the individual tale and the same dose of the individual tale edema, edema, fatigue, facial redness, asthenia, ugh, pharyngeal pain, diarrhea, nausea, abdominal sk pain, arthralgia. Buttons S. Pregnancy. Severe alteration of liver function, | ent blets |

curare derivatives, non-steroidal anti-inflammatory drugs, corticosteroids, adrecorticotropin hormone, amphotericin, carbenoxin, Penicillin G, salicylic acid derivatives, digoxin, antidiabetic agents, allopurinol, amantadite, diaxoside, cytotoxic drugs, anticholinergic agents, methyldopa, cholestyramine, Vitamin D, salts calcium, carbamazepine and cyclosporine.

ATORVASTATIN/EZETIMIBA

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|--|--|
| | CAPSULE OR TABLET Each capsule or tablet contains: | Mixed hypercholesterolemia when Atorvastatin monotherapy is insufficient to achieve goals. | Oral. With or without food Adults: |
| | Atorvastatin calcium trihydrate 40.0 mg. And Ezetimibe 10.0mg | Established ischemic heart disease, history of acute coronary syndrome. | Initial: 10/10 mg per day and adjust according to response, with maximum dose of 10 mg (Ezetimibe)/80 mg (Atorvastatin). |
| 010.000.6263.00 | Package with 30 capsules or tablets. | Primary hypercholesterolemia (heterozygous familial and non-familial) | Ezetimibe should not exceed 10 mg per day Usual dose: 10/10 mg per day. |
| | | Familial primary hypercholesterolemia, homozygous. | osual dose. To roing per day. |
| | | Secondary cardiovascular prevention in the absence of response to monotherapy. | |
| | | | |

Generalities

Atorvastatin is a statin, part of the family of HMG-CoA reductase inhibitors. It is metabolized through cytochrome P450 3A4 (CYP3A4) and is a substrate of hepatic transporters. Ezetimibe inhibits intestinal cholesterol absorption through the sterol transporter, Niemann-Pick C1-Like 1 (NPC1L1), responsible for intestinal uptake of cholesterol and phytosterols.

| Risk in Pregnancy | d | |
|-------------------|-----------------|--|
| | Adverse effects | |

Statins may exceptionally affect skeletal muscle and cause myalgia, myositis and myopathy, which may rarely progress, especially in combination with fibrates, to rhabdomyolysis, characterized by significantly elevated levels of creatine kinase (CK) (>10 times the upper limit of normality), myoglobinemia and myoglobinuria, and this progresses to renal failure.

The use of ezetimibe alone is associated with muscle-related effects, including rhabdomyolysis. In preclinical studies, ezetimibe has been shown not to induce cytochrome P450 drug-metabolizing enzymes. No clinically important pharmacokinetic interactions have been observed between ezetimibe and known drugs.

metabolized by cytochromes P450 1A2, 2D6, 2C8, 2C9 and 3A4 or by N-acetyltransferase.

| Contraindications and Precautions | |
|-----------------------------------|--|
| Contraindications and Frecautions | |

Contraindications: Hypersensitivity to the drug, pregnancy and lactation, in patients with active liver disease or unexplained persistent elevation of serum transaminases that exceed 3 times the upper limit of normality.

In patients treated with antivirals for hepatitis C (glecaprevir/pibrentasvir).

| Interactions | |
|--------------|--|
| Interactions | |

Its effect decreases with non-steroidal anti-inflammatory drugs, or its intake with food (grapefruit juice or substrate); metal poisoning may occur concomitantly with lithium; potassium supplements increase the risk of hyperkalemia.

Concomitant administration of drugs that inhibit CYP3A4 or transporter proteins may result in increased plasma concentrations of atorvastatin and increase the risk of myopathy (e.g., cyclosporine,

telithromycin, clarithromycin, delavirdine, stiripentol, ketoconazole, voriconazole, itraconazole, posaconazole, some antivirals used in the treatment of HCV (e.g. elbasvir/grazoprevir) and HIV protease inhibitors, including

ritonavir, lopinavir, atazanavir, indinavir, darunavir, etc.) and moderate CYP3A4 inhibitors (e.g., erythromycin, diltiazem, verapamil, and fluconazole) as well. Efavirenz, rifampicin or St. John's wort may cause reductions

Variable plasma concentrations of atorvastatin as they are inducers of cytochrome P450 3A4.

AZILSARTAN MEDOXOMIL

| Clue | Description | Indications | Route of administration and dosage |
|------|-------------------------|------------------------|------------------------------------|
| | TABLET | Treatment of systemic | Oral. |
| | Forth Arbitat contains: | arterial hypertension. | |
| | Each tablet contains: | | Adults: |
| | | | 80 mg every 24 hours. |
| | Azilsartan medoxomil | | |

| | of potassium equivalent to 80 mg of azilsartan medoxomil. | | |
|---|---|--|--|
| 010.000.5645.01 | Package with 28 tablets. | | |
| | | Generalities | |
| | | | s active metabolite, azilsartan, which selectively otor in multiple tissues. |
| Risk in Pred | anancy | d | |
| • | | Adverse effects | |
| Headache, dizzi | ness, diarrhea, nausea, increa | sed blood creatine phosphokinas | se. |
| | C | ontraindications and Precautions | |
| | s: Hypersensitivity to the drug. | | failure, congestive heart failure, or renal artery |
| | | Interactions | |
| lithium toxicity h significant drug i chlorthalidone, c | ave been reported during conc interactions have been observe digoxin, fluconazole, glyburide, | urrent use of lithium and angiote | increases in serum lithium concentrations and nsin-converting enzyme inhibitors. No clinically omil or azilsartan with amLodipine, antacids, azone and warfarin. |
| <u>ISOPROLO</u> | DL | | |
| Clue | Description TABLET | Indications Ischemic heart disease. | Route of administration and dosage Oral. |
| | Each tablet contains: | Heart failure. | 1.25 to 20 mg per day. |
| 010.000.6255.00 | Bisoprolol fumarate 1.25 mg Box with 30 tablets | Arterial hypertension. | |
| | Each tablet contains: | Heart rate control in arrhythmias. | |
| 010.000.6256.00 | Bisoprolol fumarate 2.5 mg Box with 30 tablets | arriyumnas. | |
| 710.000.0230.00 | Each tablet contains: | | |
| | Bisoprolol fumarate 5 mg | | |
|)10.000.6257.00 | Box with 30 tablets | | |
| | | Generalities | |
| It is a selective b | oeta blocker without intrinsic sy | mpathomimetic action. | |
| Risk in Pred | anancy | | |
| Caution must be It can cause intr | e taken in pregnancy, especially auterine growth restriction and | y in the second and third trimeste neonatal adverse effects such a s in breastfeeding, there is insuff | s bradycardia and hypoglycemia. There are no |
| | | Adverse effects | |
| if abruptly discor | | if abruptly discontinued, Rayna | a if abruptly discontinued, myocardial infarction ud's phenomenon, angioedema, hypersensitivit |
| | | ontraindications and Proceedings | |
| | | ontraindications and Precautions dvanced atrioventricular blocks, | decompensated heart failure, cardiogenic |
| | | Interactions | |
| | | bradycardic offect. Antiarrhythmics that | |

BUMETANIDE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------------------|-------------------------------------|---|
| | CAPSULE OR TABLET | Associated edema Heart to | Oral. With or without food |
| | | failure, liver cirrhosis and kidney | Adults: |
| | Each capsule or tablet contains: | disease, including nephrotic | Initial: 1 mg per day and adjust according to response. |
| | Bumetanide 1.0 mg. | syndrome. Tolerated spironolactone. | Maximum dose 15mg in 24h |
| 010.000.6260.00 | Package with 20 capsules or tablets. | | Usual dose: 0.5 to 3 mg per day. |

Generalities

Powerful loop diuretic. Blocks the Na + \overline{K} + Cl - transport system in the descending limb of the loop of Henle, increasing the excretion of Na, K and Ca

Risk in Pregnancy b

Adverse effects

Hypokalemia, headache, dizziness or vertigo, muscle spasms or myalgia, in very rare cases hepatic edema and encephalopathy

Contraindications: Hypersensitivity to bumetanide, severe electrolyte deficiency, hypovolemia or dehydration, persistent anuria, hepatic encephalopathy including coma. Caution in breastfeeding women, Severe liver failure, End-stage or progressive renal failure or with elevated creatinine or urea/blood urea nitrogen (BUN).

Contraindications and Precautions

Regular monitoring of serum potassium concentrations, due to the risk of hypokalemia. Increased uric acid in the blood. Obstruction of the urinary tract. Diabetes, periodic determinations of glucose in blood and urine. Not recommended for children < 12 years

Interactions

Risk of hypotension with concomitant use of antihypertensives. Hypokalemia increases sensitivity to digoxin and sensitivity to non-depolarizing neuromuscular blocking agents. Increase in toxic effects of NSAIDs, aminoglycosides and cephalosporins. Increases the risk of QT prolongation and torsades de pointes from class IA and III antiarrhythmics. In concomitant use with proton pump inhibitors, monitoring magnesium levels

CANDESARTAN CILEXETIL-HYDROCHLOROTHIAZIDE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------------|--------------------------------|------------------------------------|
| | TABLET | Arterial hypertension systemic | Oral. |
| | Each tablet contains: | | Adults: |
| | Candesartan Cilexetil 16.0 mg. | | |
| | Hydrochlorothiazide 12.5 mg. | | 16.0/12.5 mg once daily. |
| 010.000.2530.00 | Package with 28 tablets. | | |

Generalities

Antagonist of angiotensin II receptors, AT-1 subtype with strong affinity and slow receptor dissociation.

Risk in Pregnancy

Adverse effects

Headache, low back pain, dizziness, respiratory tract infection, urinary tract infections, tachycardia, fatigue, abdominal pain. Pancreatitis, angioedema, leukopenia, thrombocytopenia and photosensitivity have occasionally been reported.

Contraindications and Precautions

Contraindications: Hypersensitivity to drugs or sulfonamide derivatives, pregnancy, lactation, severe kidney and liver failure, and gout.

Precautions: Mild to moderate liver and kidney disorders.

Interactions

None of clinical importance.

CARVEDILOL

| Clue | Description | Indications Heart | Route of administration and dosage |
|-----------------|---|---------------------------------|---|
| | TABLET | failure. | Oral |
| | Each tablet contains: Carvedilol 6,250 mg. | Systemic arterial hypertension. | Adults: |
| 010.000.2545.00 | Package with 14 tablets. | Ischemic heart disease. | Initial dose 3,125 mg every 12 hours for two weeks. |
| | Each tablet contains: Carvedilol 25 mg. | | If well tolerated, increase to 6.25 mg every 12 hours for two weeks, and if tolerance persists, maintain this dose long term. |
| 010.000.6271.00 | Package with 28 tablets. | | |

Generalities

Adrenergic receptor blocker with action on multiple-action ÿ1, ÿ1, ÿ2 receptors, which has a protective action on organs.

Risk in Pregnancy

C

Adverse effects

Dizziness, headache or mild fatigue, bradycardia, hypotension, syncope, dyspnea, nausea, abdominal pain, diarrhea, allergic rash, thrombocytopenia, leukopenia, hyperglycemia and hypoglycemia.

Contraindications and Precautions

Drug hypersensitivity, decompensated heart failure, overt liver failure, asthma, 2nd or 3rd degree atrioventricular block, severe bradycardia or sinus heart disease syndrome.

Interactions

Digoxin, insulin or hypoglycemic agents, rifampicin, cyclosporine, clonidine and calcium channel blockers.

CILOSTAZOLE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------|--|--|
| | TABLET | Intermittent claudication in | Oral. |
| | | patients with peripheral arterial disease. | |
| | Each tablet contains: | | Adults: |
| | Cilostazol 100 mg. | | |
| 010.000.4307.00 | Package with 30 tablets. | Stenosis after coronary stent placement. | 100 mg every 12 hours, 30 minutes before or 2 hours after meals. |

Generalities

Derived from quinolinone, with vasodilatory, antiplatelet, antithrombotic and antiproliferative effects, due to its action as a phosphodiesterase 3 inhibitor.

| Risk in Pregnancy | c |
|---------------------------------------|------------------|
| | Adverse effects |
| Headache, diarrhea, dyspepsia, flatul | ence and nausea. |

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug and chronic congestive heart failure.

Precautions: moderate to severe hepatic impairment, patients with a predisposition to bleeding or with a history of ventricular tachycardia, multifocal ventricular ectopia or atrial ectopia and ventricular or atrial fibrillation.

| Interactions |
|--------------|
| |

Inhibitors of CYP3A4 (ketoconazole and erythromycin) or CYP2C19 (omeprazole or lanzoprazole), HIV protease inhibitors (amprenavir, indinavir, lopinavir, nelfinavir, ritonavir and saquinavir), as well as grapefruit juice increase the plasma concentration of cilostazol . Smoking reduces the action of cilostazol by 20%.

CLOPIDOGREI

| PEOLIDOGICE | | | | |
|-----------------|--|--|------------------------------------|--|
| Clue | Description | Indications | Route of administration and dosage | |
| | DRAGEE OR TABLET | Hypercoagulable states. | Oral. | |
| | Each dragee or tablet contains: Clopidogrel bisulfate or | Prophylaxis and treatment of atherothrombotic embolisms, such as | Adults: | |
| | Clopidogrel bisulfate (Polymorphic form 2) equivalent to 75 mg of clopidogrel. | recent myocardial infarction and cerebrovascular disease. | 75 mg every 24 hours. | |
| 010.000.4246.00 | Package with 14 dragees or tablets. | Established peripheral vascular disease | | |
| 010.000.4246.01 | Package with 28 dragees or tablets. | Percutaneous coronary intervention. | | |

Generalities ADP receptor antagonist, which irreversibly inhibits platelet aggregation. Risk in Pregnancy d Adverse effects Diarrhea, gastrointestinal bleeding, thrombocytopenia, neutropenia and rash. Contraindications and Precautions Contraindications: Hypersensitivity to the drug, active bleeding and liver failure. Precautions: Patients with severe kidney failure, severe liver disease and those receiving treatment with Interactions Its adverse effects increase with oral anticoagulants, heparins and acetylsalicylic acid. Increases the adverse effects of

non-steroidal analgesics.

DIAZOXIDE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|----------------------|---|
| | INJECTABLE SOLUTION | Hypertensive crisis. | Slow IV. |
| | Each vial contains: | | Adults: |
| | Diazoxide 300 mg. | | 1 to 3 mg/kg body weight every 5 to 15 min. Maximum dose 150 mg. |
| 010.000.0568.00 | Container with a 20 mL vial. (15 mg/mL). | | |
| | | | Children: |
| | | | From 3 to 5 mg/kg body weight, it can be repeated after 30 minutes. |

Generalities

С

Arteriolar vasodilator that activates ATP-sensitive potassium channels.

Risk in Pregnancy

Adverse effects

Hyperglycemia, hyperuricemia, sodium and water retention, arterial hypotension, nausea, vomiting, angina pectoris and cardiac arrhythmias.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, ischemic coronary disease, hypoglycemia, diabetes mellitus, gout.

Precautions: It should only be applied into a peripheral vein, the use of non-thiazide diuretics is recommended. In diabetes mellitus.

Interactions

Increases the effect of antihypertensives. With diuretics, the hyperglycemic and hyperuricemic effect increases: Biotransformation increases and protein binding of phenytoin decreases.

| DII | LTI | Δ | \ZE | M |
|-----|-----|---|-----|---|
| | | | | |

vasodilation.

| ı | Clue | Description | Indications | Route of administration and dosage |
|---|-----------------|-------------------------------------|-----------------------|------------------------------------|
| ľ | | TABLET OR DRAGEE | Ischemic disease | Oral. |
| ı | | | coronary. | |
| ı | | Each tablet contains: | | Adults: |
| ı | | Diltiazem | Prinzmetal's angina. | |
| ı | | hydrochloride 30 mg. | | 30 mg every 8 hours. |
| ı | | | Arterial hypertension | |
| | 010.000.2112.00 | Package with 30 tablets or dragees. | systemic. | |

Generalities

Calcium channel blocker, reduces the concentration of calcium in cytosol and produces a decrease in cardiac activity and coronary

| 9 | | |
|--|--|--|
| Risk in Pregnancy | С | |
|] | Adverse effects | |
| Headache, fatigue, constipation, tachycardia | a, hypotension, dyspnea. | |
| [| Contraindications and Precautions | |
| Contraindications: Acute myocardial infarction | on, pulmonary edema, atrioventricular condu | ction block, severe heart, kidney or liver |
| Precautions: In the elderly and patients with | mild to moderate liver failure. | |
|] | Interactions | |
| Promotes the effects of beta blockers and d | igitalis. With non-steroidal anti-inflammatory | drugs, its hypotensive effect decreases. |

DIPYRIDAMOL

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|--|--|
| | INJECTABLE SOLUTION | To be used in the | Intravenous. |
| | Each vial contains: Dipyridamole 10 mg. | performing stress tests with thallium 201. | 0.142 mg/kg body weight/minute (0.567 mg/kg total weight) by infusion over 4 minutes. |
| 010.000.0642.00 | Package with 1 vials with 2 mL (5 mg/mL). | | |
| 010.000.0642.01 | Container with 3 vials with 2 mL (5 mg/mL). | | Maximum dose 0.84 mg/kg body weight per infusion over 6 to 10 minutes. |
| 010.000.0642.02 | Container with 5 vials with 2 mL (5 mg/mL). | | Before administration, dilute the medication with 0.45% |
| 010.000.0642.03 | Package with 10 vials with 2 mL (5 mg/mL). | | or 0.9% physiological sodium chloride solution or 5% glucose, with a ratio of 1:2, obtaining a total volume of |
| | | | approximately 20 to 50 mL. |
| | | | |
| | | | Inject Thallium-201 within 5 minutes after the 4-minute |
| | | | infusion of dipyridamole. |
| | .1 | 1 | 1 |

Antiplatelet that in intravenous administration is indicated as an alternative in the examination of myocardial perfusion with Thallium-201 and stress echocardiography images, in the evaluation of coronary diseases, particularly in patients who do not have tolerance to effort.

Generalities

| Ri | sk in Pred | gnancy | | | k |) | | | |
|-------|------------|--------|----------|----------|-----------|----------|-------------|-----------|-----------|
| | | | | | | | | | |
| | | | | | | | | | |
| | | | | ĺ | | Adverse | effects | | |
| Abdom | inal nain | naucoo | vomiting | diarrhaa | dizzinoco | hoodoobo | paraethoeia | muolaio a | and adams |

Abdominal pain, nausea, vomiting, diarrhea, dizziness, headache, paresthesia, myalgia and edema.

Contraindications and Precautions

| Contraindications: | Hypersensitivity | to the drug | or to the | components of | f the formula |
|--------------------|--------------------------------------|-------------|-----------|---------------|---------------|
| | | | | | |

Precautions: In patients with severe coronary disease and patients with bronchial asthma, adverse reactions related to the exercise test (stress) may occur and therefore, they should be closely monitored during the study.

| | 1 4 4 | |
|---|--------------|--|
| 1 | Interactions | |
| | | |

With xanthine derivatives (theophylline, tea and coffee), the vasodilatory effectiveness of dipyridamole decreases, so its consumption should be avoided 24 hours before the myocardial perfusion study (stress test). Concomitant administration with antihypertensives may increase the hypotensive effect. It antagonizes the effect of cholinesterase inhibitors, potentially aggravating myasthenia gravis.

DOBUTAMINE

| Clue | Description | Indications | Route of administration and dosage |
|------------------------------------|--|--|--|
| | INJECTABLE SOLUTION | Heart failure | Intravenous infusion. |
| 010.000.0615.00 010.000.0615.01 | INJECTABLE SOLUTION Each vial or vial contains: Dobutamine hydrochloride equivalent to 250 mg of dobutamine. Container with 5 vials with 5 mL each Container with a 20 mL vial. | Heart failure acute and chronic. Cardiogenic shock. | Adults: 2.5 to 10 µg/kg/minute, with gradual increases until therapeutic response is achieved. Children: 2.5 to 15 µg/kg/minute. Maximum dose: 40 µg/minute. |
| | | | Administer diluted in intravenous solutions |
| | | | (5% glucose or mixed) packaged in glass bottles. |

Generalities

Inotrope with direct action on beta 1 adrenergic receptors. Increases contraction force and cardiac output.

| Risk in Pregnancy | С | |
|---|--|-------------------|
| | Adverse effects | |
| Tachycardia, hypertension, anginal pain | , respiratory distress, ectopic ventricular act | ivity and nausea. |
| | Contraindications and Precautions | ſ |
| ,, | e drug, angina and acute myocardial infarcti appropriate volume expanders. In severe va | |
| 7, | Interactions | l |

Ventricular arrhythmias are favored with general anesthetics and beta blockers antagonize their effect.

DOPAMINE

| | | | Route of administration and dosage |
|-----------------|---|--|---|
| | INJECTABLE SOLUTION | Arterial hypotension. | Intravenous infusion. |
| 010.000.0614.00 | Each vial contains: Dopamine Hydrochloride 200 mg. Container with 5 vials with 5 ml. | State of shock. Correction of hemodynamic | Adults and children: 1 to 5 μg/kg body weight/minute. Maximum dose 50 μg/kg body weight/minute. |
| | Container with 5 vials with 5 mil. | imbalance. | Administer diluted in intravenous solutions |
| | | Acute kidney failure. | (5% glucose) packaged in glass bottles. |

Adrenergic effect due to stimulation of dopaminergic and adrenergic receptors (\ddot{y} and \ddot{y}) of the nervous system nice.

| Risk in Pregnancy | С |
|-------------------|-----------------|
| | Adverse effects |

| - miting | · · · · · · · · · · · · · · · · · · · | in the section and octon | |
|---------------------------------------|--|---|--|
| Nausea, vomiting, | , tremors, chills, hypertension, angina p | | ic heartbeats. |
| Contraindications | Contraind : Hypersensitivity to the drug, tachyarrh | dications and Precautions | and occlusive vascular disorders |
| Official indications. | Typersensitivity to the drug, doing | | |
| 14"th areat alkalai | | Interactions |] |
| With ergot alkaloid decrease the hypo | ds and monoamine oxidase inhibitors, a otensive effect. | arterial hypertension increases, | with antihypertensives they |
| ephedrine | | | |
| Clue | Description | Indications | Route of administration and dosage |
| | INJECTABLE SOLUTION | Arterial hypotension. | Intramuscular, subcutaneous or intravenous. |
| | Each vial contains: Ephedrine sulfate 50 mg. | Stokes syndrome Adams. | Adults: |
| 040.000.2107.00 | Container with 100 vials with 2 mL. (25 mg/ mL). | | Subcutaneous and intramuscular: 25 to 50 mg. Intravenous: 10 to 25 mg. Maximum dose: 150 mg/day. |
| | | | Children: |
| | | | Subcutaneous or intravenous: 3 mg/kg body weight/ day, divided into doses every 4 to 6 hours. |
| L | | Generalities | , |
| Sympathomimetic | with direct and indirect action on ÿ and | | _ |
| Risk in Pregn | nancy c | | |
| | | Adverse effects | ٦ |
| Insomnia, delirium | m, euphoria, nervousness, tachycardia, | | 」 and dysuria. |
| | Contrainc | dications and Precautions | ٦ |
| | | vascular disease, cardiac arrhy | 」 ythmias, cerebral atherosclerosis, glaucoma, diabetes mellitus and hyperthyroidism. |
| Precautions: In an hypertrophy. | ngina pectoris, cardiac arrhythmias, higl | h blood pressure, DM2 and DM | /11, pheochromocytoma and prostatic |
| | | Interactions | ¬ |
| Ligh blood pressu | ure can occur with antidepressants; wit | | esthetics the risk of ventricular arrhythmias |
| | ure can occur with antidepressants; with antidepressant antidepressants; with antidepressant antidepressa | | Stretics the lisk of ventuloular arrivalinas |
| | | | |
| | | | |
| | | | |
| EPLERENONE | | | |
| Clue | Description | Indications | Route of administration and dosage |
| | CAPSULE OR TABLET | Heart Failure with reduced Ejection Fraction (LVEF <40%), CF II and III of | Oral. With or without food Adults: |
| | Each capsule or tablet contains: Eplerenone 25.0 mg. | the NYHA, when ACEIs or ARA2 + Beta block have not been sufficient to improve symptoms and spironolactone | Initial: 25 mg per day and adjust according to response. |
| 010.000.6261.00 | Package with 30 capsules or tablets. | has not been tolerated. | Usual dose: 25 to 50 mg per day. |
| | ! | Systemic arterial hypertension, when triple therapy has failed and | |

Generalities

It inhibits the action of aldosterone through inhibition of the mineralocorticoid receptor.

| Risk in Pregnancy b |
|--|
| Adverse effects Hyperkalemia (elevated blood potassium), especially with concomitant use with ACE inhibitors or ARBs and renal failure, headache, dizziness, insomnia, abdominal distention, nausea, vomiting, diarrhea, rash (maculopapular), muscle spasms of myalgia, angioedema and agranulocytosis |
| Contraindications and Precautions Contraindications: Hypersensitivity to the drug, Potassium >5.5, Creatinine clearance <30 mL/min, Shock state. Caution in people with impaired kidney function and the elderly |
| Interactions The metabolism of Eplerenone is mainly through the cytochrome CYP3A pathway, so the concomitant use of drugs that strongly inhibit CYP3A (ketoconazole, itraconazole, clarithromycin, ritonavir and nelfinavir) should be considered as a |

The metabolism of Eplerenone is mainly through the cytochrome CYP3A pathway, so the concomitant use of drugs that strongly inhibit CYP3A (ketoconazole, itraconazole, clarithromycin, ritonavir and nelfinavir) should be considered as a precaution. In combination with ACE inhibitors or angiotensin 2 inhibitors, potassium must be monitored closely. Its effect decreases with non-steroidal anti-inflammatory drugs, or its intake with food; metal poisoning may occur concomitantly with lithium; potassium supplements increase the risk of hyperkalemia.

ESMOLOL

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|-------------------|---|
| | INJECTABLE SOLUTION | Tachycardia | Intravenous infusion. |
| | | supraventricular. | |
| | Each vial contains: Esmolol | · · | Adults: |
| | hydrochloride 100 mg. | | |
| | | | Initial: 500 µg/kg body weight/ |
| | Package with a vial with 10 mL (10 mg/ | | minute, followed by a maintenance dose of |
| 010.000.5104.00 | mL). | | 50 to 100 μg/kg body weight/minute. |
| | | | |
| | INJECTABLE SOLUTION | | Maximum dose: 300 μg/kg body |
| | | | weight/minute. |
| | Each vial contains: Esmolol | | |
| | hydrochloride 2.5 g. | | Administer diluted in intravenous solutions |
| | | | packaged in glass bottles. |
| 010.000.5105.00 | Container with 2 vials with 10 mL. (250 | | |
| | mg/mL). | | |
| | | | |

Generalities

Ultrashort-acting cardioselective ÿ1 adrenergic blocker .

Risk in Pregnancy C

Adverse effects

Hypotension, nausea, headache, drowsiness, bronchospasm.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, sinus bradycardia, major grade I heart block, heart and kidney failure.

Interactions

Increases the plasma concentration of digitalis. Opioids increase the plasma concentration of esmolol, reserpine increases bradycardia and produces hypotension.

STREPTOKINASE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---------------------------------------|--------------------------------|---|
| | INJECTABLE SOLUTION. | Clot dissolution in: | Intravenous. |
| | Each vial with lyophilisate contains: | | Children: |
| | | Myocardial infarction. | Initial: 1,000-5,000 IU/Kg of weight |
| | Streptokinase 250,000 IU. | Arterial thrombosis or venous. | body, followed by an infusion of 400 to 1 200 IU/Kg of body weight/h. |
| 010.000.1734.00 | Container with a vial. | | Administer diluted in intravenous solutions |
| | | Pulmonary embolism. | packaged in glass bottles. |

| 1 | INJECTABLE SOLUTION. | 1 | Intravenous. |
|---------------------|---|--|---|
| | Each vial with lyophilisate contains: | | Adults: |
| | | | Initial: 250,000 IU, followed by an infusion of |
| | Natural streptokinase or recombinant | | 100,000 IU/h for 24-72 hours. |
| | streptokinase 750,000 IU. | | Children: |
| 010.000.1735.00 | Container with a vial. | | Initial: 1,000-5,000 IU/kg of weight |
| | | | body, followed by an infusion of 400 to 1,200 IU/kg body weight/h. |
| | | | Administer diluted in intravenous solutions |
| | | | packaged in bottles of |
| | INJECTABLE SOLUTION | | glass. Intravenous. |
| | Each vial with lyophilisate contains: | | Adults: |
| | | | Arterial or venous thrombosis: |
| | Streptokinase 1,500,000 IU. | | Initial dose: 1,500,000 IU in 30 minutes, followed by 1,500,000 IU/h for 6 hours. |
| 010.000.1736.00 | Container with a vial. | | |
| | | | Myocardial infarction: |
| | | | 1,500,000 IU in 60 minutes. |
| | | | Administer diluted in intravenous solutions packaged in glass bottles. |
| I | I | 1 | I |
| | | Generalities |] |
| It forms an activat | ting complex that generates fibrinolysis, | which hydrolyzes the fibrin in o | clots. |
| Risk in Pregr | nancy c | | |
| | | Adverse effects | 1 |
| Hemorrhage, arrh | ythmias due to coronary vascular reper | fusion, arterial hypotension and | d anaphylactic reactions. |
| | Contraindi | cations and Precautions | 1 |
| Contraindications | : Hypersensitivity to the drug, internal bl | | neoplasia. |
| Precautions: Gas | trointestinal bleeding, recent surgery, re | cent trauma, and liver or kidne | y damage. |
| | | Interactions |] |
| Nonsteroidal anti- | inflammatory drugs may increase the ar | ntiplatelet effect of streptokinas | ee. |
| | | | |
| FLECAINIDE | | | |
| Clue | Description | Indications | Route of administration and dosage |
| | TABLETS | Antiarrhythmics | Oral. 100 mg every 12 hours |
| | Each tablet contains: flecainide acetate 100 mg. | | |
| 010.000.6241.00 | Bottle of 100 tablets. | | |
| 0.0.000.02 | 25.10 5. 155 (13.55) | | |
| | | | , |
| lak hitan af fant a | | Generalities | |
| of cardiomyocyte | | r the action potential, which inc | duces a decrease in the speed in phase 0 |
| Risk in Pregr | nana. | | |
| C (contraindicated | · · · · · · · · · · · · · · · · · · · | | |
| ()) | | Adverse effects |] |
| Vertigo, visual dis | turbances, lightheadedness | | |
| | Contraindi | cations and Precautions |] |
| | cent acute myocardial infarction and in patients annel blockers. Caution with DCr less than 35 | | e mortality rate. Do not use with amiodarone, |
| | | COLUMN TO THE PARTY OF THE PART | |

| | | _ |
|---|--------------|---|
| | Interactions | |
| l | Interactions | |

Due to its negative inotropic effect with beta blockers, there is an additive effect. Its plasma concentration decreases with phenytoin, phenobarbital and carbamazepine. Increases the risk of ventricular arrhythmias with mizolastine, terfenadine, rifonavir, loponavir and indinavir

IBUPROFENE

| Clue | Description | Indications Root | Route of administration and dosage |
|-----------------|--|--|---|
| | INJECTABLE SOLUTION | canal treatment | Intravenous. |
| | Each vial contains: Ibuprofen 10 mg | hemodynamically significant patent arteriosus. | Premature newborns less than 34 weeks gestational age. |
| 010.000.6076.00 | Container with 4 vials of 2 mL (10 mg/2 mL). | | Therapy cycle: three intravenous injections of Ibuprofen administered at 24-hour intervals. |
| | | | The first injection should be administered after the first 6 hours of life. |
| | | | The ibuprofen dose is adjusted according to body weight as follows: |
| | | | 1st injection: 10 mg/kg body weight. 2nd and 3rd injection: 5 mg/kg. of body weight. |
| | | | |

Generalities

Ibuprofen is an NSAID that has anti-inflammatory, analgesic and antipyretic activity. Ibuprofen is a racemic mixture of S(+) and R(-) enantiomers. In vivo and in vitro studies indicate that the S(+) isomer is responsible for clinical activity. Ibuprofen is a non-selective cyclooxygenase inhibitor, producing a reduction in prostaglandin synthesis. Since prostaglandins are involved in the persistence of the ductus arteriosus after birth, this effect is believed to be the primary mechanism of action of ibuprofen in this indication.

| Risk in Pregnancy | not applicable |
|-------------------|-----------------|
| | |
| | Adverse effects |

Thrombocytopenia, Neutropenia, bronchopulmonary dysplasia, intraventricular hemorrhage, periventricular leukomalacia, Pulmonary hemorrhage, necrotizing enterocolitis

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, patients on hemodialysis, patients with severe renal failure, patients with moderate to severe liver failure or hepatobiliary obstruction, genetic deficiency of galactose or lactose, coadministration with renin inhibitors.

Precautions: double blockade of the renin-angiotensin system, hyperkalemia, renovascular hypertension, hypotension, electrolyte imbalance, allergy to tartrazine, mitral or aortic valve stenosis, primary hyperaldosteronism.

Interactions

Chlorhexidine should not be used to disinfect the neck of the blister because it is not compatible with the Ibuprofen solution. Therefore, to perform asepsis on the ampoule before use, it is recommended to use 60% ethanol or 70% isopropyl alcohol. In order to avoid any interaction with the Ibuprofen solution during disinfection of the neck of the ampoule with an antiseptic, the ampoule must be completely dry before opening. This medication should not be mixed with other medications except with sodium chloride 9 mg/mL (0.9%) injection solution or glucose 50 mg/mL (5%) solution. In order to avoid any substantial variation in pH due to the presence of acidic medications that may remain in the infusion line, the line should be rinsed before and after administration of Ibuprofen with 1.5 to 2 mL of chloride injection solution. sodium 9 mg/mL (0.9%) or glucose 50 mg/mL (5%).

IRBESARTAN

| Clue | Description | Indications | Route of administration and dosage |
|------|-----------------------|---------------------------------|------------------------------------|
| | TABLET | Systemic arterial hypertension. | Oral. |
| | Each tablet contains: | | Adults: |
| | Irbesartan 150 mg. | | |

| 010.000.4095.00 Container with 28 tablets. | | 150-300 mg once a day. |
|---|--|---|
| | Generalities |] |
| Non-peptide antagonist of angiotensin II | receptors, AT1 subtype. | |
| Risk in Pregnancy | х | |
| | Adverse effects | 1 |
| Fatigue, edema, nausea, vomiting, dizziness, | headache. | |
| | Contraindications and Precautions |] |
| Contraindications: Hypersensitivity to the Precautions: Hypertensive patients with failure. | e drug, pregnancy and lactation. renal artery stenosis of one or both kidneys | s or patients with severe congestive heart |
| | Interactions | 1 |
| Simultaneous administration of potassium may cause increased serum potassium. | m-sparing diuretics, potassium supplement | s, or potassium-containing salt substitutes |

IRBESARTAN/AMLODIPINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------------|--|--|
| | TABLET | Treatment of hypertension | Oral. |
| | | essential arterial blood pressure in adult | |
| | Each tablet contains: | patients with chronic renal failure and | One tablet every 24 hours. |
| | | macroalbuminuria whose blood pressure has | |
| | Irbesartan 150 mg. | not been adequately controlled with | It can be administered with or without food. |
| | amLodipine besylate equivalent | monotherapy. | |
| | to 5 mg | | |
| | by amLodipino | | |
| 010.000.5801.00 | Package with 28 tablets. | | |
| | Each tablet contains: | | |
| | Irbesartan 300 mg. | | |
| | amLodipine besylate equivalent | | |
| | to 5 mg | | |
| | by amLodipino | | |
| | | | |
| 010.000.5802.00 | Package with 28 tablets. | | |
| | Each tablet contains: | | |
| | Irbesartan 150 mg. | | |
| | amLodipine besylate equivalent | | |
| | to 10 mg | | |
| | by amLodipino | | |
| | | | |
| 010.000.6268.00 | Package with 28 tablets. | | |
| | Each tablet contains: | | |
| | Irbesartan 300 mg. | | |
| | amLodipine besylate equivalent | | |
| | to 10 mg | | |
| | by amLodipino | | |
| 010.000.6269.00 | Package with 28 tablets. | | |
| | | Generalities | |

Fixed dose combination of Irbesartan/amLodipine besilate tablets for the treatment of Arterial Hypertension.

Fixed-dose combinations are single tablets formulated with two or more different medications. These formulations have been used more frequently in pain, high blood pressure and diabetes, offering the following advantages: simplicity and convenience of use, simple titration, better adherence with the possibility of promoting the effectiveness and control of chronic diseases as well as the reduction of adverse effects through the complementary action of medications.

| Risk in Pregnancy |
|-------------------|
|-------------------|

| _ | Adverse effects | 1 |
|---|---|---|
| | Adverse effects | |
| Dizziness, headache, orthostatic dizziness, ta | achycardia, cough, nausea/vomiting, diarr | hea, dyspepsia/heartburn, sexual |
| dysfunction, fatigue, edema, chest pain. | | |
| | Contraindications and Precautions | |
| Due to the presence of both Irbesartan and a | amLodipine, it is contraindicated in: hypers | ensitivity to either the active substances or |
| any component of the formulation, hypersens unstable angina (excluding Prinzmetal's angi | sitivity to dihydropyridines, cardiogenic sho | |
| | Interactions |] |
| For the combination Irbesartan and AmLodip administered alone or in combination, there is | | |

Irbesartan: Based on in vitro data, interactions are not expected to occur with drugs whose metabolism is dependent on the cytochrome isoenzymes CYP1A1, CYP1A2, CYP2A6, CYP2B6, CYP2B6, CYP2B6, CYP2B1 or CYP3A4. Irbesartan is primarily metabolized by CYP2C9; however, during clinical interaction studies, no significant interactions were observed when irbesartan was administered concomitantly with warfarin (a drug metabolized by CYP2C9). The pharmacokinetics of irbesartan are not affected by concomitant administration of nifedipine or hydrochlorothiade. Irbesartan does not affect the pharmacokinetics of simvastatin (metabolized by CYP3A4) or digoxin (efflux transporter P-glycoprotein substrate). Based on experience with the use of other medications that affect the renin-angiotensin system, administration of potassium-sparing diuretics, potassium supplements, or potassium-containing salt substitutes may cause an increase in serum potassium.

AmLodipine: It has been safely administered concomitantly with thiazide diuretics, beta-blockers, alpha-blockers, angiotensin-converting enzyme inhibitors, long-acting nitrates, sublingual glyceryl trinitrate, non-steroidal anti-inflammatory drugs, antibiotics and oral hypoglycemics. Data obtained from in vitro studies with human plasma demonstrate that amLodipine has no effect on protein binding with the drugs studied (digoxin, phenytoin, warfarin or indomethacin).

Cimetadine: Coadministration of amLodipine with cimetidine did not alter the pharmacokinetics of amLodipine.

Grapefruit Juice: Simultaneous administration of 240 mL of grapefruit juice with a single oral dose of 10 mg of amLodipine in 20 healthy volunteers had no significant effect on the pharmacokinetics of amLodipine.

Aluminum/Magnesium (antacid): Simultaneous administration of an aluminum/magnesium antacid with a single dose of amLodipine had no significant effect on the pharmacokinetics of amLodipine.

Sildenafil: When amLodipine and sildenafil were used in combination, each agent independently exerted its own blood pressure reducing effect.

Atorvastatin: Simultaneous administration of multiple doses of 10 mg amLodipine with 80 mg atorvastatin resulted in no significant change in the steady state pharmacokinetic parameters of atorvastatin.

Digoxin: Simultaneous administration of amLodipine with digoxin did not modify serum digoxin concentrations or its renal clearance in healthy volunteers.

Warfarin: simultaneous administration of amLodipine did not significantly modify the effect of warfarin on the prothrombin time.

Ciclosporine: pharmacokinetic studies with cyclosporine have shown that amLodipine does not significantly modify its pharmacokinetics.

IRBESARTAN/HYDROCHLOROTHIAZIDE

| Clue | Description | Arterial indications | Route of administration and dosage |
|-----------------|------------------------------|----------------------|-------------------------------------|
| | TABLET | Systemic | Oral. |
| | | hypertension. | |
| | Each tablet contains: | | Adults: |
| | Irbesartan 150 mg. | | |
| | Hydrochlorothiazide 12.5 mg. | | 150 mg-12.5 mg or 300 mg-12.5 mg or |
| | | | |
| 010.000.4097.00 | Package with 28 tablets. | | 300 mg- 25 mg once a day. |
| | | | |
| | Each tablet contains: | | |
| | Irbesartan 300 mg. | | |
| | Hydrochlorothiazide 12.5 mg. | | |
| | | | |
| 010.000.4098.00 | Package with 28 tablets. | | |
| | | | |
| | | | |

| 0.000.4098.00 | Package with 28 tablets. | | | | |
|-----------------|------------------------------|---------------------------|--------------------|--------------------|--|
| | | Generalitie | es |] | |
| Non-peptide ant | agonist of angiotensin II re | ceptors, subtype AT1 in c | combination with a | thiazide diuretic. | |
| Risk in Pre | gnancy | x | | | |
| | | Adverse effe | ects | 7 | |

| Fatigue, weakness | , edema, nausea, vomiting, dizziness, hea | dache, sexual dysfunction and | abnormal uresis. |
|----------------------------------|--|---|---|
| | Contraindic | cations and Precautions | |
| | Hypersensitivity to the drug, pregnancy ants with severe kidney and liver disease. | | _ |
| | | Interactions | \neg |
| increased serum p | · · · · · · · · · · · · · · · · · · · | | ootassium-containing salt substitutes may cause hydrochlorothiazide, it may be necessary to |
| | E, DINITRATE | | |
| Clue | Description | Indications | Route of administration and dosage |
| | INJECTABLE SOLUTION | Angina pectoris. | Intravenous infusion. |
| | Each mL contains: Isosorbide dinitrate 1 mg. | Chronic ischemic heart disease. | Adults: |
| 040 000 4448 00 | - | | From 2 to 7 mg/hour, until the therapeutic |
| 010.000.4118.00 | Container with 100 mL (1 mg/1 mL). | Heart failure. | response is obtained. Maximum dose 10 mg/hour. |
| 010.000.4118.01 | Container with 10 apollets with 10 mL (10 mg/ 10 mL). | | Administer diluted in intravenous solutions packaged in glass bottles. |
| | | Generalities | |
| Nitrate that reduce | s the requirement and increases the sup | | um. Vasodilation increases coronary flow. |
| Risk in Pregn | ancy | | |
| Nisk III Tegri | | | _ |
| Tarkers and a second | | Adverse effects | |
| i acnycardia, arrnyti | nmias, angina, dizziness, hypotension, head | dache, restiessness, vomiting a | ind nausea. |
| | | cations and Precautions | |
| Contraindications: | Hypersensitivity to the drug, arterial hypo | otension, glaucoma, anemia, l | nead trauma, and liver or kidney dysfunction. |
| | | Interactions | |
| With antihypertens | ives, opiates and ethyl alcohol, hypotens | Interactions ion increases. Adreneraic me | dications decrease its antianginal effect |
| vvia ananyportone | ivos, opiatos ana saryr alconol, hypotono | non moreages. Adrenergie me | alouiono doorodoo no armanginai orroot. |
| | | | |
| COCODDID | E, MONONITRATE | | |
| Clue | Description | Indications | Route of administration and dosage |
| | TABLET | Angina pectoris. | Oral. |
| | Each tablet contains: Isosorbide 5-mononitrate 20 mg. | Myocardial infarction. | Adults: |
| 010.000.4120.00 | Package with 20 tablets. | Arterial hypertension systemic. | Take 20 or 40 mg every 8 hours. |
| | - | Congestive heart failure. | Start with low doses and do not exceed 80 mg per day. |
| | | | |
| Nitrate that increas resistance. | ses the supply and decreases cardiac oxy | Generalities ygen demand, by reducing ca | rdiac preload and peripheral |
| Dick in Brown | ancy C | | |
| Risk in Pregn | апсу | | |
| | | Adverse effects | |
| Headache, vertigo | , nausea, vomiting, arterial hypotension a | and tachycardia. | |
| | Contraindic | cations and Precautions | 7 |

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, states of low cardiac output, hypovolemia and arterial hypotension.

| Precautions: Do not drive vehicles or heavy machine | ery. |
|---|------|
|---|------|

Interactions

Increases the effect of antihypertensive medications.

IVABRADINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|---|--|
| | COMPRESSED | Chronic heart failure | Oral. |
| | Each tablet contains: lvabradine 5 mg equivalent to 5,390 mg of hydrochloride lvabradine | as an adjunct to basic treatment, not first- line or monotherapy with systolic dysfunction, NYHA class II to IV, in patients with | Adults and people over 18 years of age: Initial dose of 5 mg twice daily: After two weeks increase to 7.5 mg twice a day depending on |
| 010.000.6071.00 | Package with 56 tablets. | sinus rhythm and whose heart rate is greater than or equal to 75 bpm, in | therapeutic response. |
| | COMPRESSED Each tablet contains: | combination with background therapy, particularly with beta-blockers at optimal doses or when beta-blockers | |
| | Ivabradine 7.5 mg equivalent to 8,085 mg of hydrochloride Ivabradine | are contraindicated or not tolerated. | |
| 010.000.6072.00 | Package with 56 tablets. | | |

Ivabradine is a drug that exclusively reduces heart rate, acting by selectively inhibiting the cardiac pacemaker current that controls spontaneous diastolic depolarization in the sinus node and regulates heart rate. The cardiac effects are specific to the sinus node with no effect on intraatrial, atrioventricular or intraventricular conduction times, nor on myocardial contractility or ventricular repolarization.

Generalities

| Risk in Pregnancy | | Х |
|-------------------|---------|---------|
| 80 | | |
| | Adverse | effects |

Light phenomena (phosphenes), blurred vision, headache, bradycardia, first degree AV block (prolongation of the PQ interval on the ECG), uncontrolled blood pressure.

Contraindications and Precautions

Hypersensitivity to ivabradine or any of the excipients, resting HR less than 70 bpm before treatment, cardiogenic shock, acute myocardial infarction, severe hypotension (< 90/50 mmHg), severe liver failure, sinus node disease, sinoatrial block, acute or unstable heart failure, pacemaker dependence, unstable angina, third degree AV block, concomitant use with potent cytochrome P450 3A4 3A4 inhibitors such as azole antifungals (ketoconazole, itraconazole), macrolide antibiotics (clarithromycin, oral erythromycin, josamycin, telithromycin), HIV protease inhibitors (nelfinavir, ritonavir) and nefazodone, concomitant treatment with verapamil or diltiazem, pregnancy and lactation.

Interactions

Medications that prolong the QT interval (quinidine, disopyramide, beppridil, sotalol, ibutilide, amiodarone, pimozide, ziprasidone, sertindole, mefloquine, halofantrine, pentamidine, cisapride, erythromycin, intravenous). CYP3A4 inhibitors such as azole antifungals (ketoconazole, itraconazole), macrolide antibiotics (clarithromycin, oral erythromycin, josamycin, telithromycin), HIV protease inhibitors (nelfinavir, ritonavir). Heart rate-lowering drugs diltiazem or verapamil.

LABETALOL

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|------------------------|---------------------------|--|
| | Injectable solution. | Hypertensive emergency. | Intravenous. |
| | Each vial contains: | Hypertensive emergency of | 40-80 mgs IV every 10 minutes. |
| | Labetalol 100 mg/20 mL | pregnancy. | Start with 20 mg IV, maximum dose of 300 mg. |
| 010.000.6259.00 | Box with a vial | | Infusion of 1-2 mg/min IV |

Generalities

It is an alpha and beta adrenergic receptor blocker.

| Risk in Pregnancy | |
|-------------------|--|
|-------------------|--|

Caution must be taken in pregnancy, especially in the second and third trimesters, the data are not sufficient.

It can cause intrauterine growth restriction and neonatal adverse effects such as bradycardia and hypoglycemia. There are no known teratogenic effects. Consider alternatives in breastfeeding, there is insufficient data in humans

Adverse effects

Heart failure, severe bradycardia, atrioventricular blocks, exacerbation of angina if abruptly discontinued, myocardial infarction if abruptly discontinued, ventricular arrhythmias if abruptly discontinued, Raynaud's phenomenon, hypersensitivity, systemic lupus erythematosus, bronchospasm

Contraindications and Precautions

Hypersensitivity, bradycardia, atrioventricular blocks, decompensated heart failure, cardiogenic shock, bronchospasm.

Interactions

Non-dihydropyridine calcium antagonists. Antiarrhythmics that cause bradycardia.

LEVOSIMENDAN

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|-----------------------------------|-----------------------------------|--|
| | INJECTABLE SOLUTION | Congestive heart failure serious. | Intravenous (central or peripheral infusion). |
| | Each mL contains: | | Adults: |
| | Levosimendan 2.5 mg. | | Loading dose: 12 ÿg/kg body weight for 10 minutes. |
| 010.000.5097.00 | Container with 1 vial with 5 mL. | | |
| 010.000.5097.01 | Container with 1 vial with 10 mL. | | Maintenance dose: 0.05 – 0.2 ÿg/kg body weight, according to response, for 24 hours. |
| | | | Administer diluted in intravenous solutions packaged in glass bottles. |
| | | | |

Generalities

Increases the contractility of the heart by increasing the sensitivity of the heart muscle to calcium.

Risk in Pregnancy

С

Adverse effects

Headache, hypotension, extrasystoles, atrial fibrillationv and ventricular tachycardia.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, mechanical obstruction that affects ventricular filling.

Precautions: Kidney failure, children and adolescents.

Interactions

It can be administered simultaneously with furosemide, digoxin and nitroglycerin.

LIDOCAINE

| 6 INJECTABLE SOLUTION uch vial contains: Lidocaine | Extrasystoles ventricular. | Intravenous. |
|--|--|--|
| ch vial contains: Lidocaine | | 1 a |
| drochloride 500 mg. | Ventricular fibrillation . | Adults: |
| ckage with 5 50 mL vials. | Ventricular tachycardia. | Antiarrhythmic: 1 to 1.5 mg/kg body weight/dose administered slowly. |
| | Ventricular ectopia caused by hypotension. | Maintenance: 1 to 4 mg/minute. |
| | | Administer diluted in solutions IVs packaged in glass bottles. |
| | , and the second | ckage with 5 50 mL vials. Ventricular tachycardia. Ventricular ectopia |

Generalities

| Sodiur | m channel block | ser. Class 1B antiarrhythmic th | nat reduces dep | polarization, the automaticity of the | ventricles in the diastolic phase. |
|---------------------------|--------------------------------|--|--------------------------|--|---|
| F | Risk in Pregr | nancy | b | | |
| | | ſ | | Adverse effects | |
| | otension, agit ession. | L ation, drowsiness, blurre | | | ப eness, sweating and respiratory |
| Contr | raindications | [: Hypersensitivity to the | | dications and Precautions entricular block. | |
| | | | | Interactions | |
| effect increa enhai | ts on the hea ase. With cir | art and lidocaine is metal netidine it can cause an | bolized more increase in | ffects. With anticonvulsants e quickly. With beta-adrener lidocaine in the blood. Neur | from the hydantoin group, it has depressiv gic blockers, the toxicity of lidocaine may omuscular blockers may have their effect effect of medications that increase cardiac |
| | DTAN | | | | |
| LOSA | Clue | | | | |
| | Olue | Description DRAGEE OR TABLET | Sys | Indications stemic arterial hypertension. | Route of administration and dosage Oral. |
| | | COVERED | | | Adults: |
| | | Each dragee or coated tablet contains: Losartan potassium 50 mg. | | | 50 mg every 24 hours. |
| 010.00 | 00.2520.00 | Package with 30 coated tablets or dragees. | | | |
| | | 1 | | Generalities | |
| Non-pe | eptide antagonis | st of angiotensin II receptors, A | T1 subtype tha | at blocks vasoconstriction and the e | ffects of aldosterone. |
| | | | | | |
| F | Risk in Pregr | nancy | d | | |
| | | [| | Adverse effects | |
| Occa | sional vertig | o, orthostatic hypotensic | on, and rash | | |
| | raindications | : Hypersensitivity to the eding. | | dications and Precautions | |
| | | ľ | | Interactions | \neg |
| Phen | obarbital an | ا d cimetidine favor its bio | transformati | Interactions | |
| | | | | | |
| 100 | Clue | ID HYDROCHLOR | | | _ |
| | Olue | Description DRAGEE OR TABLET | <u> </u> | Indications High blood pressure | Route of administration and dosage Oral. |
| | | COVERED | | systemic. | Adults: |
| | | Each tablet or coated tablet con | tains: | | One dragee every 24 hours. |
| | | Losartan potassium 50.0 mg. Hydrochlorothiazide 12.5 mg. | | | |
| 010.00 | 00.2521.00 | Package with 30 coated tablets or dragees. | | | |
| | | Ī | | Generalities | |
| Comb | bination of a | non-peptide antagonist | of Angiotens | sin II receptors, subtype AT | and a thiazide diuretic. |
| F | Risk in Pregr | nancy | x | | |

| | | Adverse effects | |
|--------------------------------|---|--|---|
| Anaphylactic real hypotension. | actions, angioneurotic edema, glo | ttis edema, diarrhea, rarely hepati | tis, presence of dry cough and arterial |
| | Con | traindications and Precautions | 7 |
| | | d other sulfonamide medications a | and anuria. |
| | | Interactions | 7 |
| | | | can accentuate orthostatic hypotension, it with other antihypertensives has a synergistic |
| METHYLDOP. | A | | |
| Clue | Description | Indications High | Route of administration and dosage |
| | TABLET Each tablet contains: Methyldopa 250 mg. | blood pressure in pregnancy. As an alternative to spironolactone | Oral. Adults: 250 mg to 1 g/day, in one to three doses a day. |
| 010.000.0566.00 | Package with 30 tablets. | resistant hypertension. In | Children: 10 to 40 mg/kg body weight/day, in three doses. Maximum dose: 65 mg/day. |
| | | Generalities | |
| Central antagor | ist prodrug of alpha two adrenerg | ic receptors. | |
| Risk in Pre | | 0 | |
| | | Adverse effects | |
| | static hypotension, dry mouth, diz | ziness, depression, edema, sodiu | m retention, gynecomastia, galactorrhea, |
| MAOIs | | traindications and Precautions nromaffin tumors, acute hepatitis, l | iver cirrhosis, renal failure and with |
| | | Interactions | |
| With adrenergic | s, antipsychotics, antidepressants | s and amphetamines, it can cause | a hypertensive effect. |

MILRINONE

| Clue | Description | Indications Heart | Route of administration and dosage |
|-----------------|--|----------------------------|--|
| | INJECTABLE SOLUTION | failure | Intravenous. |
| | | congestive and acute post- | |
| | Each vial contains: Milrinone lactate | heart surgery. | Adults: |
| | equivalent to | | Initial: 50 µg/kg in 10 minutes. |
| | 20 mg milrinone. | | Maintenance: 0.500 μg/kg/minute infusion; do not |
| 040 000 5400 00 | | | exceed 1.13 mg/kg/minute. |
| 010.000.5100.00 | Container with a vial bottle with | | Administer diluted in intravenous solutions |
| | 20 mL (1 mg/1 mL). INJECTABLE SOLUTION | | |
| | INJECTABLE SOLUTION | | packaged in glass bottles. |
| | Each vial or vial contains: | | |
| | Milrinone lactate equivalent to | | |
| | 10 mg milrinone. | | |
| | | | |
| 010.000.5100.01 | Package with three vials or vials with | | |
| | 10 mL each (1 mg/1 mL). | | |
| | | | |

Generalities

Selective inhibitor of cyclic AMP phosphodiesterase in cardiac and vascular muscle, with positive inotropic effect, direct vasodilatory action and with minimal chronotropic effect.

| Risk in Pregnancy C |
|---|
| Adverse effects |
| Supra and ventricular arrhythmias, arterial hypotension, chest pain, headache, shortening of the conduction time of the atrioventricular node. |
| Contraindications and Precautions Contraindications: Hypersensitivity to the drug, severe obstructive valvular disease and breastfeeding, Precautions: Do not dilute in sodium bicarbonate solutions, requires dose adjustment in case of renal failure, in association with diuretics. |
| Interactions |
| It is precipitated when furosemide and bumetanide are administered in the same tube. |

NESIRITIDE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---|--------------------------|--|
| | INJECTABLE SOLUTION | Heart failure | Intravenous. |
| | Each vial with lyophilisate contains: | decompensated congestive | Adults and people over 18 years of age, with systolic blood pressure greater than 110 mm H |
| | Nesiritide citrate at 1.58 mg nesiritide. | Acute lung edema. | and creatinine less than 1.7 mg/dL: |
| 010.000.4200.00 | Container with a vial. | | Bolus of 2 ÿg/kg body weight, followed by a continuous infusion of 0.01 ÿg/kg body weight |
| | | | body/minute. |
| | | | The initial dose should not be more than 2 ÿg/kg body weight. |
| | | | Exclusive use in coronary units and intensive care units of highly specialized hospitals. |
| | | | |

Generalities

Human B-type natriuretic peptide (hBNP) acts on the cardiorenal axis, exerting its effects on the vascular system, heart and kidneys.

| Risk in Pregnancy | d |
|-------------------|-----------------|
| | Adverse effects |

Symptomatic or asymptomatic hypotension, ventricular tachycardia, ventricular extrasystoles, angina pectoris, bradycardia, headache, abdominal pain, back pain, insomnia, dizziness, anxiety, nausea and vomiting.

Contraindications and Precautions

Contraindications: hypersensitivity to the drug.

Precautions: Neseritide should not be used as first-line therapy in patients with cardiogenic shock or in patients with systolic blood pressure ÿ 90 mm Hg.

Interactions

Increased symptomatic hypotension in patients receiving angiotensin-converting enzyme inhibitors.

SODIUM NITROPRUSSIDE

| Clue | Description | Indications | Route of administration and dosage |
|------|---|----------------------------------|--|
| | INJECTABLE SOLUTION | Hypertensive crisis. | Intravenous infusion. |
| | Each vial with powder or solution contains: | Malignant arterial hypertension. | Adults and children: 0.25 to 1.5 μg/kg body weight/min, until |
| | Sodium nitroprusside 50 mg. | 7 | therapeutic response is obtained. |

| 010.000.0569.00 Container with a vial with or without dilue | ent. Left ventricular failure. | In exceptional cases, the dose can be increased to 10 µg/kg body weight/minute. |
|---|---|---|
| | | Administer diluted in intravenous solutions packaged in glass bottles. |
| Vasodilator that produces a decrease in pre- and a | Generalities afterload, leading to an increase in card | liac output. |
| Risk in Pregnancy | d | |
| | Adverse effects | 1 |
| Sweating, nausea, lassitude, headache. Thiocyana | ate poisoning (toxic metabolite) produc | es psychosis and seizures. |
| Со | ntraindications and Precautions |] |
| Contraindications: Hypersensitivity to the drug, arte | | |
| Precautions: Do not administer for more than 24 to | | encouraged. |
| | Interactions | _ |
| With antihypertensives, its hypotensive effect incre | eases. | |

NOREPINEPHRINE

| ı | Clue | Description | Indications | Route of administration and dosage |
|---|-----------------|---|-----------------------|---|
| | | INJECTABLE SOLUTION | Arterial hypotension. | Intravenous infusion. |
| | | Each vial contains: Norepinephrine bitartrate equivalent to 4 mg of norepinephrine. | | Adults and children: 16 to 24 μ g/minute, adjust the dose and drip according to therapeutic response. |
| | 010.000.0612.00 | Container with 50 4 mL vials. | | Administer diluted in intravenous solutions packaged in glass bottles. |

Generalities

Adrenergic neurotransmitter that increases blood pressure by increasing peripheral vascular resistance.

Risk in Pregnancy C

Adverse effects

Headache, tachycardia, anxiety, dyspnea, reflex bradycardia, hypertension and phlebitis.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, advanced shock, hyperthyroidism, coronary insufficiency, high blood pressure and diabetes.

Interactions

With tricyclic antidepressants its hypertensive effects increase.

OLMESARTAN/HYDROCHLOROTHIAZIDE

| CLIVILOAITIA | IV/IIIDINOGIILONOTIIIAZ | IDL | | in the second se |
|-----------------|------------------------------|----------------------|----------|--|
| Clue | Description | Indications | | Route of administration and dosage |
| | TABLET | Initial treatment of | f the | Oral. |
| | | Systemic | arterial | |
| | Each tablet contains: | hypertension. | | Adults: |
| | Olmesartan medoxomil 20 mg. | | | |
| | Hydrochlorothiazide 12.5 mg. | | | 20mg – 12.5 mg, 40 mg – 12.5 mg or |
| 010.000.6249.00 | Container with 28 tablets | | | 40 mg – 25 mg once a day. |
| | Each tablet contains: | | | |
| | Olmesartan medoxomil 40 mg. | | | |

| 010.000.6250.00 | Hydrochlorothiazide 12.5 mg. Package with 28 tablets. | | |
|----------------------------|---|---|-------------------------|
| | | Generalities | |
| Non-peptide antag | onist of angiotensin II re | ceptors, AT1 subtype in combination with a thiazide diure | tic. |
| | · · · · · · · · · · · · · · · · · · · | in Pregnancy ndicated in pregnancy) | |
| | | Adverse effects | |
| Fatigue, weakness, | edema, nausea, vomiting, | dizziness, headache, sexual dysfunction and abnormal uresis. | |
| | [| Contraindications and Precautions | |
| Contraindications disease. | : Hypersensitivity to the | drug, pregnancy and lactation. Precautions: patients with | severe kidney and liver |
| | ĺ | Interactions | |
| | • | sparing diuretics, potassium supplements, or potassium-cohol, barbiturates and narcotics potentiate the action of | S . |

PENTOXYFYLLINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|--------------------------------|--|
| | INJECTABLE SOLUTION | Intermittent claudication. | Intravenous infusion. |
| | Each vial contains: Pentoxifylline 300 mg. | Vascular insufficiency. | Adults: |
| | 300 mg. | Insufficiency cerebrovascular. | 300 mg every 12 hours, do not exceed 1200 mg/day. |
| 010.000.4122.01 | Container with 5 vials with 15 mL. | | Administer diluted in intravenous solutions packaged in glass bottles. |

Generalities

Methylxanthine derivative that reduces blood viscosity and gives flexibility to the erythrocyte, thereby improving capillary blood flow.

Risk in Pregnancy c

Adverse effects

Headache, dizziness, nausea, vomiting and gastrointestinal pain.

may be necessary to adjust the doses of antidiabetic medications

Contraindications and Precautions

Contraindications: Hypersensitivity to caffeine, theophylline and theobromine, cerebral hemorrhage and breastfeeding. Precautions: In cardiac arrhythmias, arterial hypotension, myocardial infarction and renal failure.

Interactions

Increases the effect of antihypertensives, anticoagulants and insulin.

PERINDOPRIL/AMLODIPINE

| Clue | Description | Indications | Route of administration and dosage |
|-------------------------|---|--|------------------------------------|
| Clue 010.000.6231.00 | TABLETS Each tablet contains: Perindopril arginine 5 mg. AmLodipine 5 mg. Bottle with 30 tablets. Each tablet contains: Perindopril arginine 10 mg. AmLodipine 5 mg. | Systemic of hypertension the ar treatment. | Oral. |

| I | tle with 30 tablets. | | |
|--|--|--|--|
| | | | |
| | | Generalities | 1 |
| | | e, preventing the formation of | |
| | | n Pregnancy dicated in pregnancy) | |
| | , | Adverse effects |] |
| | , headache, mood disorders, drowsines icks. AmLodipine. Headache, fatigue, n | | s, vertigo, cramps, localized skin rashes edema, palpitations and dizziness. |
| patients with mitral surgery or anesthes | Contraindi indications: perindopril is contraindicate stenosis and left ventricular outflow obsia with drugs that induce hypotension. ications: Hypersensitivity to the drug, the elderly | struction; administer with caution | on in patients who will undergo major |
| The association wit | The state of the s | |] iuretics, due to the risk of hyperkalemia. e should be considered. AmLodipine. With |
| | RIL / AMLODIPINE / INDA | \PAMIDE | |
| | | ····· | |
| Clue | Description | Arterial | Route of administration and dosage |
| | | | Route of administration and dosage Oral. |
| | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. | Arterial Systemic indications | Oral. One tablet, taken once in the morning before breakfast. |
| | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. | Arterial Systemic indications | Oral. One tablet, taken once in the morning before |
| Clue | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. | Arterial Systemic indications | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable |
| Clue | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. Box with 30 tablets. | Arterial Systemic indications | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable |
| Clue | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. Box with 30 tablets. Each tablet contains: Perindopril arginine 10 mg. amLodipine besylate 10 mg. | Arterial Systemic indications | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable |
| 010.000.6237.00 010.000.6240.00 Perindopril: Inhibits active metabolite po | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. Box with 30 tablets. Each tablet contains: Perindopril arginine 10 mg. amLodipine besylate 10 mg. Indapamide 2.5 mg. Box with 30 tablets. | Arterial Systemic indications hypertension. Generalities eventing the formation of angionation to the companion of the compa | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable for initial treatment. otensin II from angiotensin I, through its protion in the cortical segment. AmLodipine: |
| 010.000.6237.00 010.000.6240.00 Perindopril: Inhibits active metabolite processed control of the control of t | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. Box with 30 tablets. Each tablet contains: Perindopril arginine 10 mg. amLodipine besylate 10 mg. Indapamide 2.5 mg. Box with 30 tablets. | Arterial Systemic indications hypertension. Generalities eventing the formation of angionation to the companion of the compa | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable for initial treatment. otensin II from angiotensin I, through its protion in the cortical segment. AmLodipine: |
| 010.000.6237.00 010.000.6240.00 Perindopril: Inhibits active metabolite pc Calcium channel bl | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. Box with 30 tablets. Each tablet contains: Perindopril arginine 10 mg. amLodipine besylate 10 mg. Indapamide 2.5 mg. Box with 30 tablets. | Systemic indications hypertension. Generalities eventing the formation of angionation that inhibits sodium reabsordiac and vascular smooth must | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable for initial treatment. otensin II from angiotensin I, through its protion in the cortical segment. AmLodipine: |
| O10.000.6237.00 O10.000.6240.00 Perindopril: Inhibits active metabolite pt Calcium channel bl Risk in Pregn X (Contraindicated | Description TABLETS Each tablet contains: Perindopril arginine 5 mg. amLodipine besylate 5 mg. Indapamide 1.25 mg. Box with 30 tablets. Each tablet contains: Perindopril arginine 10 mg. amLodipine besylate 10 mg. Indapamide 2.5 mg. Box with 30 tablets. | Arterial Systemic indications hypertension. Generalities eventing the formation of angionatic that inhibits sodium reabsordiac and vascular smooth must | Oral. One tablet, taken once in the morning before breakfast. The association with fixed doses is not suitable for initial treatment. otensin II from angiotensin I, through its protion in the cortical segment. AmLodipine: |

Contraindications and Precautions

Perindopril. Contraindications: perindopril is contraindicated in children. Precautions: it should be administered with caution in patients with mitral stenosis and left ventricular outflow obstruction; administer with caution in patients who will undergo major surgery or anesthesia with drugs that induce hypotension. Indapamide. Use with caution in patients with liver conditions, photosensitivity reactions, lactose intolerance, with hydroelectrolyte alterations. AmLodipine. Contraindications: Hypersensitivity to the drug, the elderly, liver damage and deficiency of myocardial perfusion.

| 10 | | |
|----|--------------|--|
| | Interactions | |

Perindopril. It should not be associated with potassium salts and/or potassium-sparing diuretics, due to the risk of hyperkalemia. The association with diuretics, neuroleptics and antidepressants derived from Imipramine should be considered. Indapamide. Lithium, the association with class Ia and III antiarrhythmics and antipsychotics can induce torsade de pointes; the association with NSAIDs can reduce the antihypertensive effect; The association with ACE inhibitors can induce hypotension and/or acute renal failure. AmLodipine. With antihypertensives, their hypotensive effect increases

PERINDOPRIL/INDAPAMIDE

| Clue | Description | Indications | | Route of administration and dosage |
|-----------------|---|-------------------------------------|----------|---|
| | TABLETS Each tablet contains: Perindopril arginine 5 mg. Indapamide 1.25 mg. | Systemic of hypertension treatment. | arterial | Oral. One tablet once a day. Take in the morning before breakfast. |
| 010.000.6235.00 | Box with 30 tablets. | | | |
| 010.000.6236.00 | Each tablet contains: Perindopril arginine 10 mg. Indapamide 2.5 mg. | | | |
| 010.000.6236.00 | Box with 30 tablets. | | | |

Generalities

Perindopril. They inhibit the angiotensin-converting enzyme, preventing the formation of angiotensin II from angiotensin I, through its active metabolite perindoprilat. Indapamide. Thiazide diuretic that inhibits sodium reabsorption in the cortical segment.

Risk in Pregnancy

X (Contraindicated in pregnancy)

Adverse effects

Perindopril. Cough, headache, mood disorders, drowsiness, asthenia, digestive disorders, vertigo, cramps, localized skin rashes and acute gout attacks. Indapamide. Syncope, vomiting, altered liver function tests, skin hypersensitivity reactions, maculopapular rashes, hypokalemia.

Indapamide.

Contraindications and Precautions

Perindopril. Contraindications: perindopril is contraindicated in children. Precautions: it should be administered with caution in patients with mitral stenosis and left ventricular outflow obstruction; administer with caution in patients who will undergo major surgery or anesthesia with drugs that induce hypotension.

Indapamide. Use with caution in patients with liver conditions, photosensitivity reactions, lactose intolerance, with hydroelectrolyte alterations.

Interactions

Perindopril. It should not be associated with potassium salts and/or potassium-sparing diuretics, due to the risk of hyperkalemia. The association with diuretics, neuroleptics and antidepressants derived from Imipramine should be considered. Indapamide. Lithium, the association with class Ia and III antiarrhythmics and antipsychotics can induce torsade de pointes; the association with NSAIDs can reduce the antihypertensive effect; The association with ACE inhibitors can induce hypotension and/or acute renal failure.

PRAZOSIN

| Clue | Description | Indications | Route of administration and dosage |
|------|---|--|--|
| | CAPSULE OR TABLET Each capsule or tablet contains: | Arterial hypertension. Heart failure. | Oral. Adults: Initial: 0.5 to 1 mg every 8 or 12 hours. |

| 010.000.0573.00 | Prazosin hydrochloride equivalent to 1 mg of prazosin. Package with 30 capsules or tablets. | | Support: 6 to 15 mg/day, divided into 2 to 3 doses, adjust according to therapeutic response. Maximum dose: 20 mg/day. |
|----------------------|--|--|---|
| | | | Children: |
| | | | 25 to 40 µg/kg of body weight every 6 hours, adjust |
| | 1 | ' | according to therapeutic response. |
| | | Generalities | 7 |
| Blocker Alpha1 | adrenergic antagonist, which de | creases peripheral vascular resist | ance. |
| | | | |
| Risk in Preg | gnancy | С | |
| | - | A 1 | - |
| | | Adverse effects | |
| Postural hypotensio | n, dizziness, lipothymia, syncope, head | lache, asthenia, palpitations, nausea, tach | ycardia, drowsiness and weakness. |
| | | | |
| | | studia disetione and December | ¬ |
| | | ntraindications and Precautions | ⊣ |
| Contraindications: H | ypersensitivity to the drug, coronary insu | ifficiency, heart failure, kidney failure and th | e elderly. |
| Precautions: Ra | ynaud's syndrome, prostatic hy | perplasia and orthostatic hypotens | ion. |
| | | Interactions | ٦ |
| With antihyperte | nsives and diuretics, the hypote | ensive effects increase. | _ |

PROPAPHENONE

| | Clue | Description | Indications | Route of administration and dosage |
|---|-----------------|---|----------------------------|---|
| | | TABLET | Ventricular extrasystoles. | Oral. |
| | | Each tablet contains: Propafenone Hydrochloride | Ventricular tachycardia. | Adults: |
| | | 150 mg. | Ventricular fibrillation. | Impregnation: 150 mg every 6 to 8 hours for 7 days. |
| ļ | 010.000.0537.00 | Package with 20 tablets. | | Maintenance: 150 to 300 mg every 8 hours. |

Generalities

It blocks the influx of sodium into the cardiac cell, decreasing the automaticity and speed of cardiac conduction.

Risk in Pregnancy

Adverse effects

Anorexia, nausea, dizziness, blurred vision, hypotension and atrioventricular block.

Contraindications and Precautions

Contraindications: Hypersensitivity to the drug, atrioventricular block, heart failure and severe pulmonary obstruction.

Interactions

Increases plasma levels of digitalis, warfarin and beta blockers.

QUINIDINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|---------------------------|--------------------------------------|---|
| | TABLET | Atrial fibrillation or flutter. | Oral. |
| | | | |
| | Each tablet contains: | Paroxysmal supraventricular | Adults: |
| | Quinidine sulfate 200 mg. | tachycardia. | 200 to 400 mg every 4 to 6 hours. |
| | | | |
| 010.000.0527.00 | Package with 20 tablets. | Ventricular and atrial extrasystole. | Children: |
| | | | 25 mg/kg body weight/day, divided every 8 hours for |
| | | | 10 days. |

| | 1 | |
|---|---|---|
| | | |
| | | |
| , | 0 | 1 |
| | Generalities | |
| Sodium channel blocker that reduces the | speed of depolarization and conduction. | |
| | | |
| Risk in Pregnancy | С | |
| · ···································· | | |
| Ĭ | Adverse effects | |
| | | l |
| Dry mouth, nausea, constipation, urinary retention, | erythema, blurred vision, myocardial depression, hy | potension and cinchonism. |
| | | |
| 1 | | 1 |
| | Contraindications and Precautions | |
| Contraindications: Hypersensitivity to the | drug, myocardial damage, atrioventricular | block, heart, liver or kidney failure, |
| shock and glaucoma. | | |
| • | | |
| I | Interactions | |
| Phenoharbital and phenytoin promote its hiotransfor | mation Increases the effect of oral and digitalis anti- | n coagulants by decreasing their elimination |

SACUBITRIL VALSARTAN

| Clue | Description | Indications Heart | Route of administration and dosage |
|-----------------|--|--|---|
| | COMPRESSED | failure (Class | Oral. |
| | Each tablet contains: | NYHA function II-IV) in patients with systolic dysfunction and left | Adults: |
| | Sacubitril valsartan sodium hydrate | ventricular ejection fraction (LVEF) | 200 mg twice a day. |
| | equivalent to 50 mg of Sacubitril valsartan | ÿ35%, with elevated natriuretic peptide and failure to previous treatment. | A starting dose of 100 mg twice a day is recommended. The dose will be doubled every 2-4 weeks until reaching the planned dose of 200 |
| 010.000.6112.00 | Package with 30 tablets. | | mg twice a day. |
| | COMPRESSED | | Maximum recommended dose 400 mg/day. |
| | Each tablet contains: Sacubitril valsartan sodium hydrate | | |
| | equivalent to 100 mg of Sacubitril valsartan | | |
| 010.000.6113.00 | Container with 60 tablets. | | |
| | COMPRESSED | | |
| | Each tablet contains: Sacubitril valsartan sodium hydrate | | |
| | equivalent to 200 mg of Sacubitril valsartan | | |
| 010.000.6114.00 | Container with 60 tablets. | | |

| Sacubitrile Valsartan is an inhibitor of neprilysin and the angiotensin receptor. It acts by inhibiting neprilysin through LBQ657, |
|--|
| which is the active metabolite of the prodrug Sacubitril, and simultaneously antagonizing the angiotensin II type 1 (AT1) |
| receptor, through Valsartan. The complementary renal effects and cardiovascular benefits of Sacubitril Valsartan in patients |
| with heart failure are attributed to the increase in concentrations of peptides that are degraded by neprilysin, such as |
| natriuretic peptides, and to the simultaneous inhibition of the deleterious effects of angiotensin II. Natriuretic peptides exert |
| their effects by activating receptors present on cell membranes that are coupled to a guanylyl cyclase, resulting in increased |
| concentrations of the second messenger, cyclic guanosine monophosphate (cGMP), which promotes vasodilation, natriuresis |
| and diuresis, increased glomerular filtration and renal blood flow, inhibition of renin and aldosterone release, reduction of |

natriuretic peptides, and to the their effects by activating recei concentrations of the second n and diuresis, increased glomerular filtration a sympathetic activity, as well as antihypertrophic and antifibrotic effects. Sustained activation of the renin-angiotensinaldosterone system causes vasoconstriction, renal sodium and fluid retention, activation of cell development and proliferation, and, as a consequence, maladaptive cardiovascular remodeling. Valsartan inhibits the detrimental effects of angiotensin II on the cardiovascular and renal systems by selectively antagonizing the AT1 receptor, in addition to inhibiting angiotensin IIdependent aldosterone release.

Generalities

| I | Risk in Pregnancy | X | |
|---|------------------------------------|---|---|
| | | | |
| | | Adverse effects | |
| | Hyperkalemia, arterial hypotension | renal dysfunction, hypokalemia, dizziness | headache, vertigo, syncope, orthostatic hypotensi |

cough, diarrhea, nausea, renal failure, fatigue and asthenia.

| Contrain | dications a | and Drocou | itions |
|------------|-------------|------------|--------|
| ı Contrain | ulcalions a | anu Precai | นแบบร |

Contraindications: Hypersensitivity to the active components of the formula, co-administration with Angiotensin Converting Enzyme Inhibitor (ACEI), should not be administered until 36 hours after stopping treatment with ACEI, history of angioedema related to the use of ACEI or Antagonist Angiotensin Receptor Receptor (ARA), coadministration with aliskiren in patients with type 2 diabetes mellitus and pregnancy.

Precautions: Doses of Sacubitril Valsartan greater than 400 mg/day should not be used. If hypotension occurs, consideration should be given to adjusting the dose of diuretics or antihypertensives being administered in combination, in addition to considering other causes of hypotension (such as hypovolemia). If hypotension persists despite these measures, the dose of Sacubitril Valsartan should be reduced or its administration temporarily suspended. Symptomatic hypotension is more likely to occur if the patient suffers from hypovolemia as a result of, for example, treatment with diuretics, a low-sodium diet, diarrhea or vomiting. Sodium loss, hypovolemia, or both must be corrected before starting treatment with Sacubitril Valsartan. Analyze the possibility of reducing the dose of Sacubitril Valsartan in patients who present a clinically significant decrease in renal function. Use medications that increase potassium concentrations (such as potassium-sparing diuretics and potassium supplements) with caution when administered together with Sacubitril Valsartan; If clinically significant hyperkalemia occurs, consideration should be given to reducing the potassium content of the diet or adjusting the dosage of concomitant medications. If angioedema appears, immediately discontinue administration of Sacubitril Valsartan. Monitor renal function in patients with renal artery stenosis.

Precautions regarding dosage: The recommended starting dose of Sacubitril Valsartan is 100 mg twice a day.

A starting dose of 50 mg twice daily is recommended in patients not taking an angiotensin-converting enzyme inhibitor (ACE inhibitor) or an angiotensin II receptor antagonist (ARB), and should be considered in the case of patients who have previously taken low doses of these drugs.

The dose of Sacubitril Valsartan will be doubled every 2 to 4 weeks until the planned dose of 200 mg twice daily is reached, depending on the patient's tolerability.

| 1 | Interactions | - 1 |
|---|---------------|-----|
| | IIIICIACIOIIS | |

The joint administration of Sacubitril Valsartan and an ACEI is contraindicated because the concomitant inhibition of neprilysin and the action of the ACEI may increase the risk of angioedema. Administration together with aliskiren is contraindicated in patients with type 2 diabetes. Concomitant use of Sacubitril Valsartan with aliskiren should be avoided in patients with renal dysfunction. Sacubitril Valsartan acts as an antagonist of angiotensin II receptors, so it should not be combined with an ARB. Sacubitril inhibits the organic anion transporters OATP1B1 and OATP1B3, therefore it may increase systemic exposure to OATP1B1 and OATP1B3 substrates such as statins. Therefore, caution should be exercised when co-administering Sacubitril Valsartan and a statin. Caution should be exercised when starting to administer sildenafil or another phosphodiesterase type 5 inhibitor to patients receiving sacubitrile valsartan as it is associated with a reduction in blood pressure. Coadministration with potassium-sparing diuretics, mineralocorticoid receptor antagonists, potassium supplements, or potassium-containing table salt substitutes may increase serum potassium and creatinine concentrations.

In elderly patients, hypovolemic patients and patients with impaired renal function, the administration of sacubitril valsartan and a non-steroidal anti-inflammatory drug may increase the risk of worsening renal function. Serum lithium concentrations should be monitored during joint treatment for possible manifestations of toxicity.

The pharmacologically active metabolite of Sacubitril (LBQ657) and Valsartan are substrates of OATP1B1, OATP1B3 and OAT3; Valsartan is also a substrate of multidrug resistance protein 2 (MRP2). Therefore, coadministration of Sacubitril Valsartan and an inhibitor of OATP1B1, OATP1B3, OAT3 (such as rifampicin), or MRP2 (such as ritonavir) may increase the systemic exposure of LBQ657 or Valsartan, respectively.

TELMISARTAN

| Clue | Description | Indications High | Route of administration and dosage |
|-----------------|--------------------------|---------------------------|------------------------------------|
| | TABLET | blood pressure essential. | Oral. |
| | Each tablet contains: | | Adults: |
| | Telmisartan 40 mg. | | |
| 010.000.2540.00 | Package with 30 tablets. | | 40 mg every 24 hours. |

| 010.000.2540.00 | Package with 30 tablets. | | 40 mg every 24 hours. |
|-------------------|--------------------------|--------------------------------------|-----------------------|
| Non-peptide anta | gonist of angiotensin II | Generalities receptors, AT1 subtype. |] |
| Risk in Pregr | nancy | d | |
| | | Adverse effects |] |
| Back pain, diarrh | ea, flu-like symptoms, d | dyspepsia and abdominal pain. | |

Contraindications and Precautions

| Contraindications or kidney failure. | : Hypersensitivity to the dru | g, pregnan | ncy, lactation, obstructive pa | thology of the bile ducts, severe liver and/ |
|--------------------------------------|--|----------------|---------------------------------|--|
| | | | Interactions | 1 |
| Enhances the hypincreases. | ootensive effect of other ant | tihypertens | | with digoxin, its plasma concentration |
| | | | | |
| | | | | |
| | | | | |
| ELMISARTA | N, HYDROCHLORO | <u> SAIHTC</u> | IDE | |
| Clue | Description | | Indications | Route of administration and dosage |
| | TABLET OR CAPSULE | Es | sential arterial hypertension. | Oral. |
| | Each tablet or capsule contains: Telmisartan 80.0 mg. Hydrochlorothiazide 12.5 mg. | | | Adults: 80 mg-12.5 mg every 24 hours. |
| 010.000.2542.00 | Package with 14 tablets or capsules. | | | |
| | | | Generalities |] |
| Combination of a | non-peptide antagonist of A | | II receptors, subtype AT1 a | und a thiazide diuretic. |
| | | | | |
| Risk in Pregr | nancy | Х | | |
| | | A | dverse effects |] |
| Anaphylactic read hypotension. | ctions, angioneurotic edema | a, glottis ed | lema, diarrhea, rarely hepati | tis, presence of dry cough and arterial |
| | | Contraindio | cations and Precautions |] |
| Contraindications | : Hypersensitivity to the dru | g, kidney o | or liver failure. | |
| | | | Interactions |] |
| | ary to adjust the dose of ant | | | can accentuate orthostatic hypotension, a with other antihypertensives has a |
| | | | | |
| ENECTEPLA | \SF | | | |
| Clue | Description | | Indications | Route of administration and dosage |
| | INJECTABLE SOLUTION | | Acute infarction of the | Intravenous: single bolus in 5-10 seconds. |
| | Each vial contains: Tenecteplase 50 | | myocardium. | Adults: |
| | mg (10,000 U). | | Thrombolytic treatment of acute | |
| 010.000.5117.00 | Package with vial and syringe prefilled | d with 10 | myocardial infarction. | Patient mg (kg body U Volume (mL) weight) |
| | mL of injectable water. | a with 10 | | < 60 30 6000 ÿ60-<70 35 7000 6. |
| | | | | ÿ70-<80 40 8000 ÿ80-<90 45 9000 7. ÿ90 50 10000 8. |
| | | | | 9. |
| | | | | 10. |
| | | | | 1 |
| B I l . | | | Generalities | |
| ventricular function | | that causes | s rapid vascular repermeabil | ization that leads to the preservation of |
| Risk in Pregr | nancy | Х | | |
| | | A | dverse effects | 1 |
| | | rthmias, en | | rstals, thrombotic embolization, nausea, spasm. |
| Contraindications and Precautions | | | | |
| | | | | orrhagic diathesis, active or recent ypertension, endocarditis or |

| bacterial pericarditis, | acute pancreatitis or peptic ulcer in the las | it three months, esophageal varices and | d arterial aneurysms. |
|--|---|--|---|
| | | Interactions | 1 |
| The prior or simu | Itaneous administration of anticoag | | inhibitors increases the risk of bleeding. |
| | | | |
| | | | |
| TIROFIBAN | er e | | |
| Clue | Description | Indications | Route of administration and dosage |
| | INJECTABLE SOLUTION | States of hypercoagulability. | Intravenous infusion. |
| | Each vial or bag contains: | | Adults: |
| | | Prophylaxis of post-coronary vascular reperfusion | Initial dose: |
| | Tirofiban hydrochloride equivalent to 12.5 mg of Tirofiban. | thrombosis with thrombolytics. | 0.4 μg/Kg/minute, for 30 minutes. |
| | | | Maintenance dose: |
| 010.000.4123.00 | Container with a vial bottle with 50 mL. | | At the end of the initial dose continue with 0.1 µg/Kg/minute. |
| 010.000.4123.01 | Container with a bag with 250 mL. | ļ | |
| | | Generalities |] |
| Non-peptide anta platelet aggregati | | events the binding of fibrinogen t | co GP IIB/IIIa, blocking cross-linking and |
| Risk in Pre | gnancy | d | |
| | | Adverse effects |] |
| Bleeding, thromb | ocytopenia, chills, abdominal pain, | dizziness, headache and nause | a. |
| | Contra | indications and Precautions | 1 |
| | | nbocytopenia, active bleeding, h | istory of intracranial hemorrhage or tumor, |
| | | Interactions | 7 |
| | gulants the prothrombin time is prol nd tetraclines the anticoagulant acti | | bleeding can be caused, with digitalis, |
| | | | |
| GI VCERVI | TRINITRATE | | |
| Clue | Description | Indications | Route of administration and dosage |
| | 1111505151515011151011 | Hypertensive crisis. | Intravenous infusion. |
| | Each vial contains: Glyceryl | Treatment and prophylaxis of | Adults: |
| | | angina pectoris. | |
| | | Chronic ischemic heart disease. | 5 to 15 µg per minute. The dose is increased until systolic pressure is reduced to normal limits. |
| 010.000.4114.00 | Package with a 10 mL vial. | Heart failure. | |
| | | rieart failuie. | Administer diluted in intravenous solutions packaged in glass bottles. |
| | PATCH | | Transdermal. |
| | Each patch releases: Glyceryl trinitrate 5 mg/day | | Adults: |
| 010.000.4111.00 | Package with 7 patches. | | 5 mg/day. |
| | . ashago mar r patorios. | Conordition | ' ' |
| It is a noworful va | ecodilator that releves the periphers | Generalities | thy reducing cardiac output and ovugen |
| consumption by t | | a arteries and veins, consequen | tly reducing cardiac output and oxygen |
| Risk in Preg | nancy | С | |
| | | Adverse effects | 1 |

Headache, tachycardia, hypotension and dizziness, tolerance and physical dependence.

| | Contraindications and Precautions | |
|--|--|---|
| Contraindications: Hypersensitivity to the dru | ug, arterial hypotension, head trauma, cardiom | nyopathy and anemia, do not use in children |
| | | |
| 1 | Interactions | |
| With antihypertensives, opiates and ethyl ald decreases. | cohol, hypotension increases. With adrenergic | agents their antianginal effect |

VALSARTAN

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------------|----------------------------------|------------------------------------|
| | COMPRESSED | Essential arterial hypertension. | Oral. |
| | Each tablet contains 80 mg. | | Adult: |
| 010.000.5111.00 | Package with 30 | | 80 mg every 24 hours. |
| | tablets. | | |

Generalities

Non-peptide antagonist of angiotensin II receptors, AT1 subtype. Angiotensin II, as a potent vasoconstrictor, produces a direct pressor response. In addition, it promotes sodium retention and stimulates the secretion of aldosterone.

| Risk in Pregnancy | d | |
|--|------------------------------------|--|
| • | Adverse effects | |
| Vertigo, insomnia, rash and decrease | ed libido. | |
| | Contraindigations and Propositions | |
| The second of the design of the second of th | Contraindications and Precautions | |
| Hypersensitivity to the drug, pregnan | cy and lactation. | |
| | Interactions | |
| Phenobarbital and cimetidine favor its | s biotransformation. | |

VERAPAMIL

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--|------------------------|---|
| | DRAGEE OR COATED TABLET | Atrial arrhythmias. | Oral. |
| | Each coated tablet or dragee contains: | Angina pectoris. | Adults: |
| | Verapamil Hydrochloride 80 mg. | Arterial hypertension. | 80 mg every 8 hours. |
| 010.000.0596.00 | Package with 20 coated tablets or dragees. | | |
| | | | |
| | INJECTABLE SOLUTION | | Intravenous. |
| | Each vial contains: Verapamil | | Adults: |
| | Hydrochloride 5 mg. | | 0.075 to 0.15 mg/kg body weight for 2 minutes. |
| 010.000.0598.00 | Container with 2 mL (2.5 mg/ mL). | | |
| | , , | | Children from 1 to 15 years: |
| | | | 0.1 to 0.3 mg over 2 minutes. |
| | | | Children under 1 year old. |
| | | | 0.1 to 0.2 mg/kg body weight. |
| | | | In all cases, the dose can be repeated 30 minutes |
| | | | later if the desired effect does not appear. |
| | | | |
| | | | Administer diluted in intravenous solutions packaged in glass bottles. |
| | | | paolagea in glass solites. |

Generalities

It inhibits the flow of calcium ions (and possibly sodium ions) through slow calcium channels in contractile and conduction cells and vascular smooth muscle cells. Calcium channel blocker in cardiac and smooth muscle.

| Risk in Pregnancy | С | |
|--|---|---|
| | Adverse effects | I |
| , | 710100 0110010 | |
| Nausea, dizziness, headache, flushing, hyp | otension, constipation, edema. | |
| , | , , | |
| | Contraindications and Precautions | |
| Contraindications: Hypersensitivity to the di | rug, lactation, cardiogenic shock, atrioventric | cular block, arterial hypotension, asthma |
| and beta blockers. Precautions: Kidney and | | and block, arterial hypoteriolom, detrima |
| • | | 1 |
| | Interactions | |
| With hote blockers by notonsion and heart failure or | o favorad: rapitidina and arythromysin degrades its | hiotranoformation |

WARFARINE

| Clue | Description | Indications | Route of administration and dosage |
|-----------------|--------------------------|---|---|
| | TABLET | Prophylaxis and treatment of thromboembolic conditions. | Oral. |
| | Each tablet contains: | | Adults and kids older than 12 years old: |
| | Warfarin sodium 5 mg. | Deep venous thrombosis | |
| | | | Initial: 2-5 mg/day |
| 010.000.0623.00 | Package with 25 tablets. | Pulmonary thromboembolism. | 10 to 15 mg daily for two to five days afterward. |
| | | | |
| | | | |
| | | | Maintenance: 2 to 10 mg per day, according to the |
| | | | prothrombin time. |

Generalities

Coumarin anticoagulant that inhibits the effect of vitamin K and consequently decreases the formation of coagulation factors II (prothrombin), VII, IX, X and proteins C and S.

| Risk in Pregnancy | х | |
|---|--|--|
| | Adverse effects |] |
| The most frequent and important risk is he alopecia and dermatitis. | morrhage (6 to 29%); that occurs anywhere | in the body. Nausea, vomiting, diarrhea, |
| | Contraindications and Precautions |] |
| Contraindications: Hypersensitivity to the d | Irug. Pregnancy, active bleeding, recent sui | • |

ulcer, threatened abortion, pregnancy, blood dyscrasias, bleeding tendency, severe arterial hypertension.

Precautions: Breastfeeding, children under 18 years of age. The dose should be lower in elderly and debilitated patients.

Interactions

Most medications increase or decrease the anticoagulant effect of warfarin, so it is necessary to readjust its dose based on the prothrombin time each time a medication is added or stopped.