

CHLOROTHIAZIDE

Trade Name	Biomed suspension
Class	Thiazide diuretic
Mechanism of Action	Inhibits sodium reabsorption in the distal tubules Increases loss of sodium, potassium, magnesium, chloride, bicarbonate and, phosphate Decreases calcium loss
Indications	Chronic lung disease Congestive heart failure
Contraindications	Hyperbilirubinaemia. Anuria. Severe renal or hepatic failure. Hypercalcaemia. Hypersensitivity to sulphonamide derived drugs.
Supplied As	50mg/mL (oral suspension)
Dilution	Not required.
Dosage	20-40mg/kg/day
Interval	12 hourly
Administration	Oral with feed
Incompatible With	Steroids potentiate potassium loss. Milk-alkali syndrome with high calcium doses. When used with digoxin may increase risk of digoxin toxicity.
Monitoring	Serum electrolytes, glucose, uric acid and renal function.
Stability	As per date on bottle, preservative free. Discard 7 days after opening
Storage	Refrigerate, shake before use.
Adverse Reactions	GI upset, hyperbilirubinaemia, cholestasis, pancreatitis, electrolyte disturbances including hypokalaemia, hypomagnesaemia, hyponatraemia, hypercalcaemia, hyperchloraemic alkalosis, hyperglycaemia, hyperuricaemia,
Metabolism	Poor oral absorption 10 - 20%. Onset 2 hours, peak 4 hours, excreted unchanged in the urine. Half life 5 hours.
Comments	Diuretic effect potentiated when used in combination with spironolactone, frusemide. Displaces bilirubin from albumin. Due to manufacturing difficulties Hydrochlorothiazide may need to be used – dose equivalent is 1-2mg/kg/day Section 29 – unapproved medicine

