VOLUME II

Advice for the Patient®

Drug Information in Lay Language

USP DI®

1997

17TH EDITION

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This main volume of *USP DI, Advice for the Patient,* is supplemented regularly as part of a continuing subscription service. Readers should consult the index of the latest *USP DI Update* to ascertain whether there has been any revision of the drug information herein.

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To The Reader

When purchasing a medicine, whether over-the-counter (nonprescription) or with a doctor's prescription, you may have questions about its usefulness to you, the best way to take it, possible side effects, and precautions to take to avoid complications. For instance, some medicines should be taken with meals, others between meals. Some may make you drowsy while others may tend to keep you awake. Alcoholic or other beverages, other medicines, certain foods, or smoking may affect the way your medicine works. As for side effects, some are merely bothersome and may go away while others may require medical attention.

Advice for the Patient contains information which may provide general answers to some of your questions as well as suggestions for the correct use of your medicine. *It is important to remember, however, that the human body is very complex and medicines may act differently on different people—and even in the same person at different times. If you want additional information about your medicine or its possible side effects, ask your doctor, nurse, or pharmacist. They are there to help you.*

How To Use This Book

Advice for the Patient contains a section of general information about the correct use of any medicine, as well as individual discussions of a wide variety of commonly and not so commonly used medicines. *You should read both the general information and the information specific to the medicine you are taking.* See Appendix I for this general information.

Each medicine has a generic name that all manufacturers who make that medicine must use. Some manufacturers also create a brand name to put on the label and to use in advertising. *Look in the index* for the generic name or the brand name of the medicine about which you have questions. We have put the generic names and common brand names in the same index, so you do not have to know whether the name you have is a generic name or a brand name. However, it is a good idea for you to learn both the generic and the brand names of the medicines you are using and to write them down and keep them for future use.

Although the informational entries generally appear in alphabetical order by generic name, there are numerous occasions when closely related medicines are grouped under a family name. Therefore, the surest way to quickly find the page number of the information about each medicine is to *look in the index first.*

The information for each medicine is presented according to the area of the body which is affected. As a general rule, information for one type of use will not be the same as for other types of use. For example, if you take tetracycline capsules by mouth for their systemic effect in treating an infection, the information will not be the same as for tetracycline ointment, which is applied directly to the skin for its topical effects. And both of these will be different from the information for tetracyclines used in the eye. The common divisions used in this publication are:

- *BUCCAL*—For general effects throughout the body when a medicine is placed in the cheek pocket and slowly absorbed.
- *DENTAL*—For local effects when applied to the teeth or gums.
- *INHALATION*—For local, and in some cases systemic, effects when inhaled into the lungs.
- *INTRA-AMNIOTIC*—For local effects when a medicine is injected into the sac that contains the fetus and amniotic fluid.
- *INTRACAVERNOSAL*—For local effects in the penis when a medicine is given by injection.
- *LINGUAL*—For general effects throughout the body when a medicine is absorbed through the lining of the mouth.
- *MUCOSAL*—For local effects when applied directly to mucous membranes (for example, the inside of the mouth).
- *NASAL*—For local effects when used in the nose.
- *OPHTHALMIC*—For local effects when applied directly to the eyes.
- *ORAL-LOCAL*—For local effects in the gastrointestinal tract when taken by mouth (i.e., not absorbed into the body).
- *OTIC*—For local effects when used in the ear.
- *PARENTERAL-LOCAL*—For local effects in a specific area of the body when given by injection.
- *RECTAL*—For local, and in some cases systemic, effects when used in the rectum.
- *SUBLINGUAL*—For general effects throughout the body when a medicine is placed under the tongue and slowly absorbed.
- *SYSTEMIC*—For general effects throughout the body; applies to most medicines when taken by mouth or given by injection or transdermal patch.
- *TOPICAL*—For local effects when applied directly to the skin.
- *VAGINAL*—For local, and in some cases systemic, effects when used in the vagina.

Notice:

The information about the drugs contained herein is general in nature and is intended to be used in consultation with your health care providers. It is not intended to replace specific instructions or directions or warnings given to you by your physician or other prescriber or accompanying a particular product. The information is selective and it is not claimed that it includes all known precautions, contraindications, effects, or interactions possibly related to the use of a drug. The information may differ from that contained in the product labeling which is required by law. The information is not sufficient to make an evaluation as to the risks and benefits of taking a particular drug in a particular case and is not medical advice for individual problems and should not alone be relied upon for these purposes. Since the inclusion or exclusion of particular information about a drug is judgmental in nature and since opinion as to drug usage may differ, you may wish to consult additional sources. Should you desire additional information or if you have any questions as to how this information may relate to you in particular, ask your doctor, nurse, pharmacist, or other health care provider.

Since new drugs are constantly being marketed and since previously unreported side effects, newly recognized precautions, or other new information for any given drug may come to light at any time, continuously updated drug information sources should be consulted as necessary. USP updates this main volume of *Advice for the Patient* with the monthly *USP DI Update*, a publication presenting selected new and revised information.

There are many brands of drugs on the market. The listing of selected brand names is intended only for ease of reference. The inclusion of a brand name does not mean the USPC has any particular knowledge that the brand listed has properties different from other brands of the same drug, nor should it be interpreted as an endorsement by the USPC. Similarly, the fact that a brand name has not been included does not indicate that that particular brand has been judged to be unsatisfactory or unacceptable.

If any of the information in this book causes you special concern, do not decide against taking any medicine prescribed for you without first checking with your doctor.

About USP

The information in this volume is prepared by the United States Pharmacopeia (USP), the organization that sets the official standards of strength, quality, purity, packaging, and labeling for medical products used in the United States.

The United States Pharmacopeia is an independent, not-for-profit corporation composed of delegates from the accredited colleges of medicine and pharmacy in the U.S.; state medical and pharmaceutical associations; many national associations concerned with medicines, such as the American Medical Association, the American Nurses Association, the American Dental Association, the National Association of Retail Druggists, and the American Pharmaceutical Association; and various departments of the federal government, including the Food and Drug Administration. Other members represent the public. USP was established 177 years ago, and is the only national body that represents the professions of both pharmacy and medicine.

The first convention came into being on January 1, 1820, and within the year published the first national drug formulary of the United States. The *U.S. Pharmacopeia* of 1820 contained 217 drug names, divided into two groups according to the level of general acceptance and usage.

When Congress passed the first major drug safety law in 1906, the standards recognized by that statute were those set forth in the *United States Pharmacopeia* and in the *National Formulary*. Today, the *USP* and *NF* continue to be the official U.S. compendia for standards for drugs and for the inactive ingredients in drug dosage forms. The *United States Pharmacopeia* is the world's oldest regularly revised national pharmacopeia and is generally accepted as being the most influential.

The work of the USP is carried out by the Committee of Revision. This committee of experts is elected by the members and currently consists of 138 outstanding physicians, pharmacists, dentists, nurses, chemists, microbiologists, and other individuals particularly qualified to judge the merits of drugs and the standards and information that should apply to them. Committee members serve without pay and are assisted by numerous advisory panels, other outside reviewers, and USP staff.

About *USP DI*

Advice for the Patient is Volume II of *USP DI*. Volume I contains drug use information in technical language for the physician, dentist, pharmacist, nurse, or other health care provider, and Volume II is its lay language counterpart for use by consumers. Volume III provides information on approved drug products and legal requirements. The monthly *USP DI Update* keeps all volumes up to date with selected new drug entries and related information. Together, the volumes form the foundation of a coordinated approach to drug-use education. Many health care providers, institutions, and associations in the United States and Canada provide individual drug leaflets based on *Advice for the Patient*. Spanish translations for many medicines are also available.

USP DI was first published in 1980. It is continuously reviewed and revised and is intended for use by prescribers, dispensers, and consumers of medications. The information is developed by the consensus of the USP Committee of Revision and its Advisory Panels and anyone, including users of medicines, may contribute through review and comment on drafts of the monographs when they are published for comment in *USP DI Review*, a part of the monthly *USP DI Update*.

For further information about *USP DI* or to comment on how the information published in this volume might better meet your information needs, please contact: USP Division of Information Development, 12601 Twinbrook Parkway, Rockville, Maryland 20852, (301) 816-8351.

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Brand names are in *italics*. There are many brands and different manufacturers of drugs and the listing of selected American and Canadian brand names and manufacturers is intended only for ease of reference. There are additional brands and manufacturers that have not been included. The inclusion of a brand name does not mean the USP has any particular knowledge that the brand listed has properties different from other brands of the same drug, nor should it be interpreted as an endorsement by the USP. Similarly, the fact that a particular brand has not been included does not indicate that the product has been judged to be unsatisfactory or unacceptable. The page numbers MC-1 to MC-28 refer to the product identification photographs in The Medicine Chart.

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