

Metoprolol

INDICATIONS:

1. Hypertension
2. Angina pectoris
3. Cardiac arrhythmias
4. Adjunct in hyperthyroidism
5. Stable symptomatic heart failure
6. Adjunct in early management of acute myocardial infarction

SAFETY ALERT:

1. Adverse Drug Reactions:

Dizziness, insomnia, tiredness, headache, vertigo, confusion, bradycardia, shortness of breath, hypotension, Raynaud's phenomenon, CHF, peripheral oedema, cold extremities, syncope, chest pain, palpitations, gangrene, claudication, hallucinations, nightmares, visual disturbances, diarrhoea, constipation, flatulence, GI pain, heartburn, nausea, hiccups, xerostomia, bronchoconstriction, wheezing, dyspnoea, dry skin, maculopapular, psoriasisiform pruritus, worsening of psoriasis, urticarial rash. Rarely Peyronie's disease, tinnitus, restless legs, musculoskeletal pain, a polymyalgia-like syndrome, decreased libido, blurred vision, dry mucous membranes, sweating, reversible alopecia, thrombocytopenia, agranulocytosis, retroperitoneal fibrosis, wt. gain, arthritis, dry eyes

2. Drug interactions:

Additive effect with catecholamine-depleting drugs & MAOIs. May antagonize beta1 adrenergic stimulating effects of sympathomimetics. Additive -ve effects on SA or AV nodal conduction with cardiac glycosides, nondihydropyridine calcium channel blockers. Paradoxical response to epinephrine may occur. Increased plasma concentrations with CYP2D6 inhibitors. Increased risk of hypotension & heart failure with myocardial depressant general anaesthetics. Risk of pulmonary HTN with vasodilators in uraemic patients, reduced plasma levels with rifampicin. May increase -ve inotropic & -ve chronotropic effects of antiarrhythmic drugs. May reduce antihypertensive efficacy with indomethacin. May increase effect of hypoglycaemics

3. Contraindications:

2nd or 3rd degree AV block, sick sinus syndrome, hypotension, decompensated heart failure, sinus bradycardia, severe peripheral arterial circulatory disorders, cardiogenic shock, severe asthma and bronchospasm, untreated pheochromocytoma. Prinzmetal's angina, metabolic acidosis

4. Precautions:

Patients with myasthenia gravis, well compensated heart failure, bronchospastic disease, AV conduction disorders, substantial cardiomegaly. May mask signs and symptoms of hyperthyroidism and hypoglycaemia. Patients with history of cardiac failure or those with

min. cardiac reserve. Patients undergoing major surgery involving general anaesthetics. Avoid abrupt withdrawal as it may precipitate thyroid storm or MI, and may exacerbate and ventricular arrhythmias. Hepatic impairment. Pregnancy and lactation. Patient counseling. May affect ability to drive or operate machinery. Monitoring parameters monitor BP, ECG and heart rate