ATOMOXETINE:

Class: Norepinephrine Reuptake Inhibitor

Indications: Treatment of attention deficit/hyperactivity disorder (ADHD).

Available dosage form in the hospital: TAB (10MG, 25MG)

Trade Names:

Dosage:**Note:** Atomoxetine may be discontinued without the need for tapering dose.

-U.S. labeling:

-Initial: 40 mg/day, increased after minimum of 3 days to ~80 mg/day; may administer as either a single daily dose or 2 evenly divided doses in morning and late afternoon/early evening. May increase to 100 mg/day in 2-4 additional weeks to achieve optimal response. Maximum daily dose: 100 mg/day.

-Dosage adjustment in patients receiving strong CYP2D6 inhibitors (eg, paroxetine, fluoxetine, quinidine) or patients known to be CYP2D6 poor metabolizers: Initial: 40 mg/day; if tolerating therapy but inadequate response, may increase after minimum of 4 weeks to 80 mg/day. Maximum daily dose: 80 mg/day.

-Canadian labeling:

-Initial: 40 mg/day for 7-14 days (Step 1); if tolerated, may increase dose at 7-14 day intervals to 60 mg/day (Step 2) then to 80 mg/day (Step 3). If optimal response is not obtained after 2-4 additional weeks, may increase to a maximum dose of 100 mg/day.

-Dosage adjustment in patients receiving strong CYP2D6 inhibitors: Initial: 40 mg/day; may increase to next dosage level after 14 days if previous dose is well tolerated but response is inadequate. **Note:** Canadian labeling does not include specific dosing recommendations in regards to patients who are poor CYP2D6 metabolizers although similar dose reductions would appear necessary.

Geriatric

Use has not been evaluated in the elderly.

Renal Impairment:

No dosage adjustment necessary.

Hepatic Impairment:

-Mild impairment (Child-Pugh class A): No dosage adjustment provided in manufacturer's labeling.

-Moderate impairment (Child-Pugh class B): All doses should be reduced to 50% of normal.

-Severe impairment (Child-Pugh class C): All doses should be reduced to 25% of normal

Common side effect:

Central nervous system: Headache (2% to 19%), insomnia (2% to 15%), somnolence (4% to 11%)

Gastrointestinal: Xerostomia (21%), nausea (7% to 21%), abdominal pain (7% to 18%), appetite decreased (11% to 16%), vomiting (3% to 11%)

Pregnancy Risk Factor: C