

BUDESONIDE N/S

Class: Corticosteroid, Nasal

Indications:

- Labeled Indications: Management of symptoms of seasonal or perennial rhinitis
- Unlabeled: Adjunct to antibiotics in empiric treatment of acute bacterial rhinosinusitis

Available dosage form in the hospital:

-BUDESONIDE 100MCG/DOSE N/SPRAY

-BUDESONIDE 64 MCG/DOSE NASAL SPRAY

-BUDESONIDE 200MCG TURBUHALER

Dosage:

-Nasal polyps: Nasal inhalation:

-Canadian labeling:

- Rhinocort® Aqua®: 256 mcg/day administered as a single 64 mcg spray in each nostril twice daily; maximum dose: 256 mcg/day
- Rhinocort® Turbuhaler®: 100 mcg into each nostril twice daily; maximum: 400 mcg/day

-Rhinitis: Nasal inhalation:

- U.S. labeling* (Rhinocort® Aqua®): 64 mcg/day as a single 32 mcg spray in each nostril. Some patients who do not achieve adequate control may benefit from increased dosage. A reduced dosage may be effective after initial control is achieved
- * Maximum dose: 256 mcg/day.

-Canadian labeling:

- Rhinocort® Aqua®: Initial: 256 mcg/day administered as two 64 mcg sprays in each nostril once daily or a single 64 mcg spray in each nostril twice daily; Maintenance: Individualize, lowest effective dose (maximum dose: 256 mcg/day)
- Rhinocort® Turbuhaler®: Initial: 200 mcg into each nostril once daily; Maintenance: Individualize, lowest effective dose (maximum: 400 mcg/day)

Geriatric

Refer to adult dosing.

Renal Impairment:

No dosage adjustment provided in manufacturer's labeling (has not been studied).

Hepatic Impairment:

No dosage adjustment provided in manufacturer's labeling. Systemic availability of budesonide may be increased in patients with cirrhosis; monitor closely for signs and symptoms of hypercorticism; dosage reduction may be required.

Common side effect:

Respiratory: Epistaxis, pharyngitis , bronchospasm , coughing , nasal irritation

Pregnancy Risk Factor: B