



## Bonus Monographs



### Chlorothiazide

(klor-oh-THIGH-ah-zyd)

**PREGNANCY CATEGORY: C**

**CLASSIFICATION(S):**

Diuretic, thiazide

**Rx:** Diurigen, Diuril

### Chlorothiazide sodium

(klor-oh-THIGH-ah-zyd)

**PREGNANCY CATEGORY: C**

**Rx:** Sodium Diuril

SEE ALSO **DIURETICS, THIAZIDES.**

#### **ACTION/KINETICS**

**Onset:** 2 hr for PO, 15 min for IV; **Peak effect:** 4 hr for PO, 30 min for IV; **Duration:** 6–12 hr. **t<sub>1/2</sub>:** 45–120 min. Incompletely absorbed from the GI tract. Produces a greater diuretic effect if given in divided doses.

#### **SPECIAL CONCERNS**

Geriatric clients may be more sensitive to the usual adult dose.

#### **ADDITIONAL SIDE EFFECTS**

Hypotension, renal failure/dysfunction, interstitial nephritis. Following IV use: Alopecia, hematuria, exfoliative dermatitis, toxic epidermal necrolysis, erythema multiforme, **Stevens-Johnson syndrome.**

#### **HOW SUPPLIED**

**Chlorothiazide:** *Oral Suspension:* 250 mg/5 mL; *Tablet:* 250 mg, 500 mg.

**Chlorothiazide sodium:** *Powder for Injection, Lyophilized:* 0.5 g

#### **DOSAGE**

##### • **ORAL SUSPENSION, TABLETS, IV**

*Diuretic.*

**Adults:** 0.5–2 g 1–2 times/day either PO or IV (reserved for clients unable to take PO medication or in emergencies). Some clients may respond to the drug given 3–5 days each week.

*Antihypertensive.*

**Adults, IV, PO:** 0.5–1 g/day in one or more divided doses. **Pediatric, 6 months and older, PO:** 22 mg/kg/day (10 mg/lb/day) in two divided doses; **6 months and younger, PO:** 33 mg/kg/day (15 mg/lb/day) in two divided doses. Thus, children up to 2 years of age may be given 125–375 mg/day in two doses while children 2–12 years of age may be given 375 mg–1 g/day in two doses. IV use in children is not recommended.

#### **NURSING CONSIDERATIONS**

SEE ALSO **NURSING CONSIDERATIONS FOR DIURETICS (THIAZIDES) AND ANTIHYPERTENSIVE AGENTS.**

#### **ADMINISTRATION/STORAGE**

1. Do not give SC or IM.
- IV** 2. Reserve IV use for adults in emergency situations or those unable to take medication PO.
3. To obtain an isotonic solution for injection, add 18 mL sterile water for injection to 500 mg powder and administer over 5 min.
4. Avoid simultaneous administration of whole blood or derivatives.
5. IV solution is compatible with NaCl or dextrose solutions.

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6. Discard unused reconstituted solutions after 24 hr.

### ASSESSMENT

List drugs currently prescribed; note any sulfa allergy.

### CLIENT/FAMILY TEACHING

1. May cause orthostatic hypotension; use caution when rising or changing positions.

2. Follow high-potassium diet.

3. Use sun screens (avoid ones with PABA), sunglasses, and protective clothing to ↓ photosensitivity.

4. Avoid alcohol and OTC agents.

### OUTCOMES/EVALUATE

- ↓ BP
- Enhanced diuresis with ↓ edema