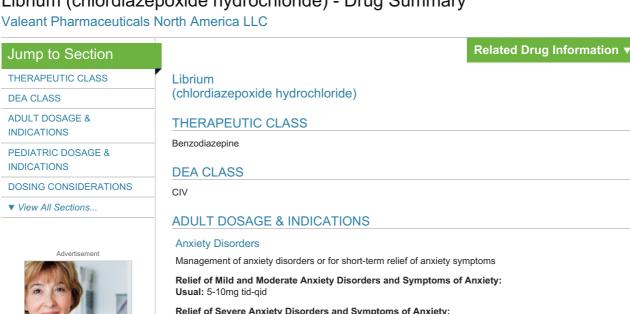




# Librium (chlordiazepoxide hydrochloride) - Drug Summary



GeneSight is a pharmacogenomic test clinically proven to improve medication selection



Relief of Severe Anxiety Disorders and Symptoms of Anxiety:

Usual: 20-25mg tid-qid

#### **Preoperative Medication**

#### Preoperative Apprehension and Anxiety:

5-10mg tid-qid on days preceding surgery

If used as preoperative medication, 50-100mg IM 1 hr prior to surgery

#### Alcohol Withdrawal

# Relief of Withdrawal Symptoms of Acute Alcoholism:

Initial: 50-100mg, followed by repeated doses prn until agitation is controlled

Max: 300mg/day

# PEDIATRIC DOSAGE & INDICATIONS

# **Anxiety Disorders**

Management of anxiety disorders or for short-term relief of anxiety symptoms

Usual: 5mg bid-qid; may increase to 10mg bid-tid in some patients

# DOSING CONSIDERATIONS

Elderly

Elderly/Debilitated: Usual: 5mg bid-gid

# **ADMINISTRATION**

Oral route

#### **HOW SUPPLIED**

Cap: 5mg, 10mg, 25mg

# WARNINGS/PRECAUTIONS

May impair mental/physical abilities, including mental alertness in children. Risk of congenital malformations during 1st trimester of pregnancy; avoid use. Paradoxical reactions (eg, excitement, stimulation, and acute rage) reported in psychiatric patients, and in hyperactive aggressive pediatric patients. Caution in treatment of anxiety states with evidence of impending depression; suicidal tendencies may be present. Caution with porphyria, renal or hepatic dysfunction. Use lowest effective dose in elderly and debilitated patients. Avoid abrupt withdrawal after extended therapy; withdrawal symptoms reported following discontinuation.

#### **ADVERSE REACTIONS**

Drowsiness, ataxia, confusion, skin eruptions, edema, nausea, constipation, extrapyramidal symptoms, libido changes, EEG changes.

# **DRUG INTERACTIONS**

Additive effects with CNS depressants and alcohol. Coadministration with other psychotropic agents not recommended; caution with MAOIs and phenothiazines. Altered coagulation effects reported with oral anticoagulants.

# PREGNANCY AND LACTATION

Not for use in pregnancy, safety not known in nursing.

#### **MECHANISM OF ACTION**

Benzodiazepine; not established. Has antianxiety, sedative, appetite stimulating, and weak analgesic actions; blocks EEG arousal from stimulation of brain stem reticular formation.

#### **PHARMACOKINETICS**

Elimination: Urine (1-2% unchanged, 3-6% conjugates); T<sub>1/2</sub>=24-48 hrs.

#### **ASSESSMENT**

Assess for pregnancy status, hepatic/renal function, and possible drug interactions.

#### **MONITORING**

Monitor elderly/debilitated patients for ataxia and oversedation, drowsiness, confusion. Monitor for paradoxical reactions in psychiatric patients and in hyperactive aggressive pediatric patients. Periodic blood counts and LFTs are advisable when treatment is protracted. Monitor for signs of impending depression or any suicidal tendencies.

#### PATIENT COUNSELING

Inform that psychological/physical dependence may occur; advise to consult physician prior to increasing dose or abruptly discontinuing therapy. Advise to notify physician if patient becomes pregnant or plans to become pregnant. May impair mental/physical abilities; caution while operating machinery/driving. May impair mental alertness in children. Avoid alcohol and other CNS depressant drugs.

# **STORAGE**

25°C (77°F); excursions permitted to 15-30°C (59-86°F).

Back to top

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