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Thiamine (thiamine hydrochloride) - Drug Summary

Mylan Institutional LLC

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Thiamine

(thiamine hydrochloride)

THERAPEUTIC CLASS

Vitamin supplement

DEA CLASS

RX

ADULT DOSAGE & INDICATIONS

Beriberi

10-20mg IM tid for as long as 2 weeks

Administer oral multivitamin preparation containing 5-10mg thiamine daily for 1 month

Neuritis of Pregnancy

W/ Severe Vomiting: 5-10mg/day IM

Wernicke-Korsakoff Syndrome

100mg IV, followed by 50-100mg/day IM until the patient is consuming a regular, balanced diet

Marginal Thiamine Status

Receiving Dextrose: 100mg in each of the 1st few liters of IV fluid

PEDIATRIC DOSAGE & INDICATIONS

Infantile Beriberi

W/ Collapse: 25mg IV may be given cautiously

ADMINISTRATION

IM/IV route

HOW SUPPLIED

Inj: 100mg/mL [2mL]

WARNINGS/PRECAUTIONS

Not for conditions of decreased oral intake or decreased GI absorption; multiple vitamins should be given. Treat "wet" beriberi with myocardial failure as an emergency cardiac condition, and administer therapy slowly by IV route. Contains aluminum that may be toxic; caution with renal impairment especially in premature neonates. Tissue loading, serious hypersensitivity/anaphylactic reactions, and deaths may occur. Perform skin test on patients who are suspected of drug allergies or previous reactions to the drug, and any positive responders should not receive thiamine by inj. Administer 1/100 of the dose intradermally and observe for 30 min if hypersensitivity is suspected; give full dose if no reaction occurs, observe for at least 30 min after inj, and be prepared to treat anaphylactic reactions regardless of the precautions taken. Simple vitamin B1 deficiency is rare; suspect multiple vitamin deficiencies in any case of dietary inadequacy. Correct poor dietary habits, and prescribe an abundant and well-balanced dietary intake.

ADVERSE REACTIONS

Hypersensitivity/anaphylactic reactions, collapse, feeling of warmth, pruritus, urticaria, weakness, sweating, nausea, restlessness, throat tightness, angioneurotic edema, cyanosis, pulmonary edema, hemorrhage into GI tract

PREGNANCY AND LACTATION

Category A, caution in nursing.

MECHANISM OF ACTION

Vitamin supplement; combines with adenosine triphosphate to form thiamine pyrophosphate, also known as cocarboxylase, a coenzyme. Its role in carbohydrate metabolism is the decarboxylation of pyruvic acid in the blood and α -ketoacids to acetaldehyde and carbon dioxide.

PHARMACOKINETICS

Absorption: (IM) Rapid and complete. **Distribution:** Distributed in all tissues. **Metabolism:** Rapid. **Elimination:** Urine.

ASSESSMENT

Assess for history of sensitivity to drug or to any of its ingredients, renal function, and pregnancy/nursing status. Perform skin test on patients who are suspected of drug allergies or previous reactions to thiamine.

MONITORING

Monitor for hypersensitivity/anaphylactic reactions, CNS and bone toxicity, tissue loading, and other possible adverse reactions.

PATIENT COUNSELING

Advise patient as to proper dietary habits during treatment so that relapses will be less likely to occur with reduction in dosage or cessation of inj therapy. Advise to notify physician if hypersensitivity reactions or other adverse reactions occur.

STORAGE

20-25°C (68-77°F). Protect from light.

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