

Acetylsalicylic 80mg tablets

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Uses

Acetylsalicylic tablets may be used for the secondary prevention of thrombotic cerebrovascular or cardiovascular disease and following by-pass surgery.

Dose and method of administration

Adults (including the elderly): The advice of a doctor should be sought before commencing therapy for the first time. The usual dose, for long term use, is 80-160mg once daily. In some circumstances a higher dose may be appropriate, especially in the short term, and up to 300mg a day may be used on the advice of a doctor.

Children: Do not give to children aged under 16 years, unless specifically indicated (e.g. for Kawasaki's disease) (see Special Warnings and Precautions for Use). Acetylsalicylic tablets must not be chewed or crushed. The tablets are best taken before meals.

Contraindications

Acetylsalicylic tablets are contra-indicated in the following:

- Active peptic ulceration or history of peptic ulceration
- Haemophilia
- Hypersensitivity to aspirin or any other NSAIDs, including those in whom attacks of asthma, angioedema, urticaria, rhinitis have been precipitated by aspirin or any other NSAID
- Hypersensitivity to any other of the constituents
- In children under 16 years unless advised by a doctor e.g. Kawasaki's disease

Special warnings and precautions for use

Before commencing long-term aspirin therapy for the management of cardiovascular or cerebrovascular disease patients should consult their doctor who can advise on the relative benefits versus the risks for the individual patient. Caution should be exercised in patients with asthma, allergic disease, impairment of hepatic or renal function (avoid if severe) and dehydration. Do not take with non-steroidal anti-inflammatory drugs as the effects would be additional. Do not take if you have a stomach ulcer. Medicines should not be taken during pregnancy without consulting your doctor. Keep out of the reach and sight of children. There is a possible association between aspirin and Reye's syndrome when given to children. Reye's syndrome is a very rare disease, which affects the brain and liver and can be fatal. For this reason aspirin should not be given to children under 16 years unless specifically indicated (e.g. Kawasaki's disease).

Interactions

Experimental data suggest that ibuprofen may inhibit the effect of low dose aspirin on platelet aggregation when they are dosed concomitantly. However, the limitations of these data and uncertainties regarding extrapolation of ex vivo data to the clinical situation imply that no firm conclusions can be made for regular ibuprofen use and no clinically relevant effect is considered to be likely for occasional ibuprofen use. Avoid concomitant administration of antacids and absorbents (excretion of aspirin is increased in alkaline urine whilst kaolin may reduce absorption). Acetylsalicylic may enhance the effects of anticoagulants and oral hypoglycaemic agents.

Other antiplatelet drugs such as clopidogrel and ticlopidine increase the risk of bleeding. Acetylsalicylic tablets may enhance the effects of phenytoin and sodium valproate. Administration together with corticosteroids may increase the risk of gastrointestinal bleeding and ulceration; corticosteroids reduce plasma concentration. The activity of methotrexate may be markedly enhanced and its toxicity increased. Acetylsalicylic tablets may antagonise the diuretic effect of spironolactone and may reduce acetazolamide excretion (risk of toxicity). Acetylsalicylic tablets increases plasma concentration of zafirlukast. Metoclopramide and domperidone enhance the effect of aspirin (increased rate of absorption). Avoid concomitant administration with mifepristone (theoretical interaction).

Acetylsalicylic tablets may inhibit action of uricosurics. The toxicity of sulphonamides may also be increased. Acetylsalicylic tablets may reduce the efficacy of antihypertensive drugs. Aspirin is pharmaceutically incompatible with iron salts and alkalis.

Undesirable side effects

Aspirin may precipitate bronchospasm and skin reactions and induce attacks of asthma in susceptible subjects. It may induce gastro-intestinal haemorrhage, occasionally major. Aspirin may also cause general gastro-intestinal side-effects such as nausea, puking and diarrhoea.

Effects on ability to drive and use machines

Aspirin does not usually affect the ability to drive or operate machinery.

Pregnancy and lactation

There is clinical and epidemiological evidence of safety in human pregnancy. Aspirin may prolong labour and contribute to maternal and neonatal bleeding and is best avoided at term and during breast feeding – possible risk of Reye's syndrome. Regular use of high doses could impair platelet function and produce hypoprothrombinaemia in the infant if neonatal Vitamin K stores are low.

Overdose

Dizziness, tinnitus, deafness, vasodilation and sweating, nausea and vomiting, headache and mental confusion. If more severe; hyperventilation, fever, restlessness, ketosis, respiratory alkalosis and metabolic acidosis. Coma, if severe, with cardiovascular collapse and respiratory failure. Hypoglycaemia may be severe in children. Overdosage should be treated initially by aspiration and lavage and a saline purgative such as sodium sulphate, 30g in 250ml of water should be given to promote peristalsis. Otherwise treat as for aspirin poisoning and observe for at least 72 hours to allow for possible delayed reaction from gastro-resistant system. Restoration of acidbase balance may be necessary.

How to store

Store below 25°C and out of sight of children.

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