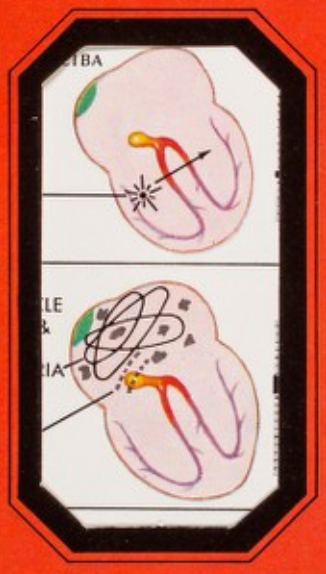
Arrhythmias and hypokalaemia : results of a recent Norwegian study ...

Arrhythmias and hypokalaemia

– Results of a recent Norwegian study

"... patients who are hypokalaemic because of diuretic treatment are more prone to develop arrhythmias during acute myocardial infarction ... this enhanced arrhythmic frequency also exists in patients not on digitalis therapy."[1]



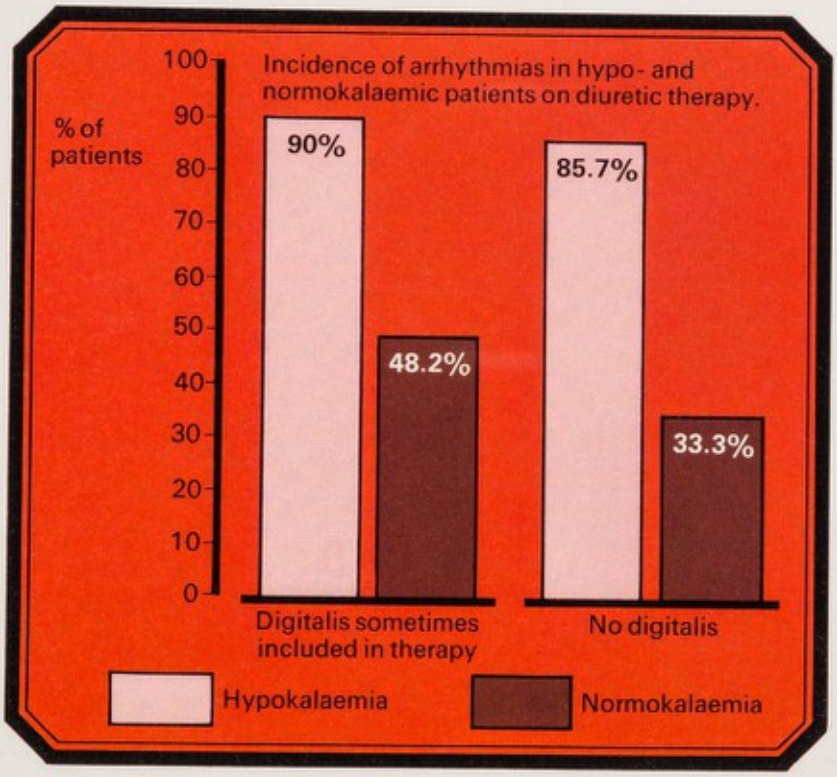
CIBA

Dangers of hypokalaemia

A recent Norwegian study[1] monitored 228 patients with continuous ECG recording for the first 3-4 days following acute myocardial infarction. In patients on diuretics, it was shown that

- significantly more arrhythmias occurred in hypokalaemic patients than in those with normokalaemia
- this enhanced arrhythmic tendency was also present in diuretic treated patients not on digitalis therapy
- all patients who developed arrhythmias had a significantly lower mean serum potassium than those without arrhythmias

"It is recommended that all patients on long-term diuretic treatment should receive potassium supplements, if hypokalaemic."[1]



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Slow-K®

Effective and reliable

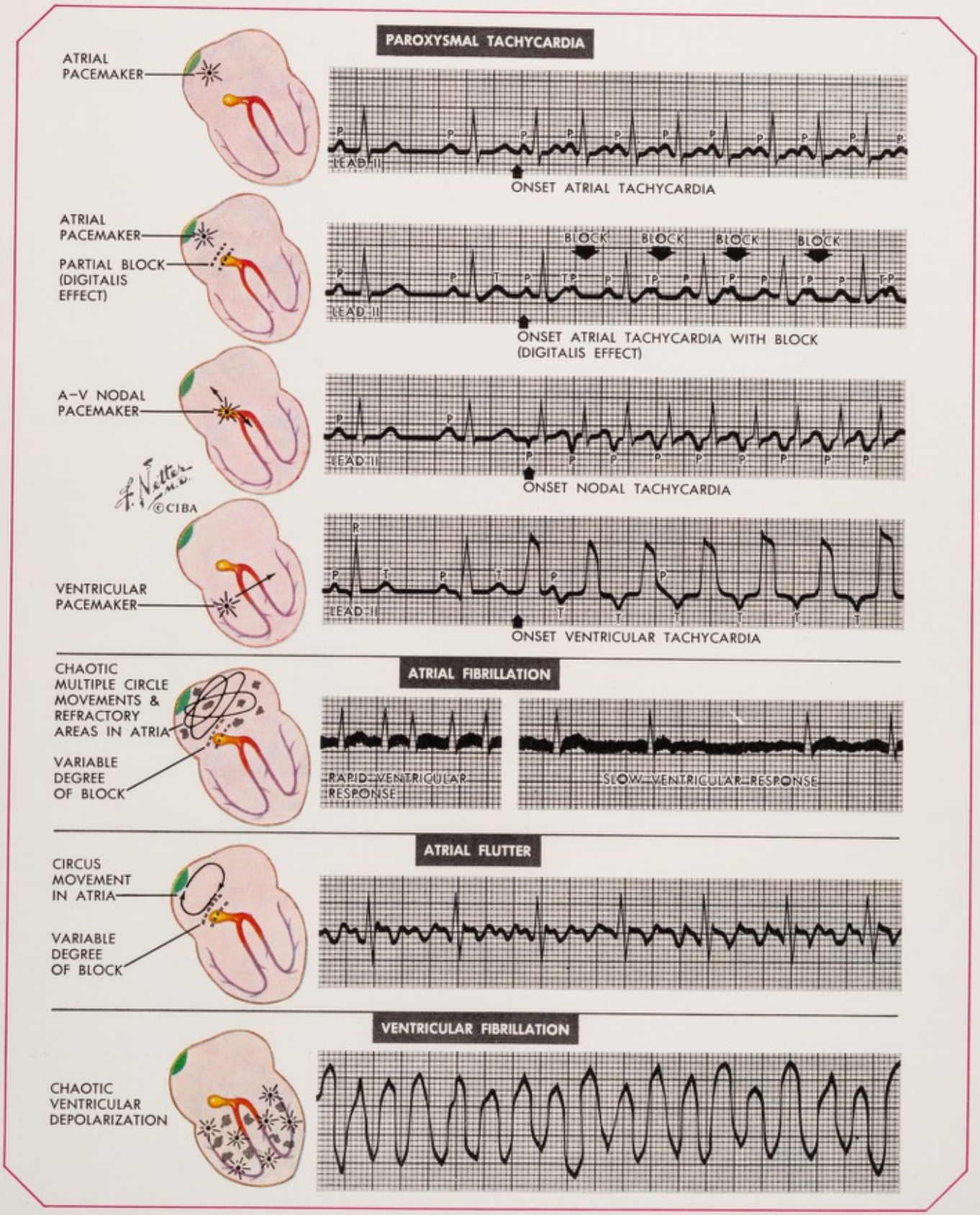
Maintains total body and plasma K in patients on diuretics Lancet (1972) ii, 8.

- 15 years' clinical experience
- amounting to more than six million patient years
- now 1.1 million patients a day take Slow-K

There's no K like Slow-K

1. *Nesje*, O.A. (1976) Journal of the Norwegian Medical Association, 24, 1257.

Tachycardia, fibrillation and flutter



Slow-K®

(sustained-release potassium chloride supplement)

For the prevention and treatment of potassium deficiency

Description
Slow-K tablets each contain 600mg potassium chloride BP (equivalent to 8.06 mEq K^+) in a slow-release wax core within a sugar coating.

Indications
Slow-K is indicated in all circumstances where potassium supplementation is necessary, particularly during prolonged or intensive diuretic therapy.
Patients at special risk are those with advanced hepatic cirrhosis or chronic renal disease, patients with gross oedema (particularly if urinary output is large), patients on a salt-restricted diet and patients receiving digitalis (a lack of potassium sensitises the myocardium to the toxic action of digitalis). The range of indications for Slow-K may be summarised as follows:-

As a supplement to diuretics
Intensive steroid, ACTH and carbenoxolone therapy
Chronic diarrhoea or vomiting
Prolonged fasting/therapeutic starvation
Bizarre diets
Ileostomy
Diabetic ketosis
Cushing's syndrome
Megaloblastic anaemia
Ulcerative colitis
Renal tubular disease
Severe heart disease

Dosage
2-6 tablets Slow-K daily are usually an adequate supplement. It is important that the tablets should be swallowed whole, and preferably administered after meals. According to the dosage of diuretic used and the needs of the individual patient, a dose ratio of one Slow-K tablet to each tablet of thiazide diuretic will usually suffice when administered as a potassium supplement. However, when the more potent diuretics such as frusemide are used, or a patient is in frank potassium depletion, larger doses of Slow-K may be required.Where intermittent diuretic therapy is being used it is probably best to continue the Slow-K on the days between the diuretic administration.

Precautions
Slow-K tablets should be administered cautiously to patients with advanced renal failure to avoid possible hyperkalaemia. Slow-K tablets are designed to avoid unpalatability and the risk of gastrointestinal irritation. However, symptoms or signs which might indicate ulceration or obstruction of the small bowel in patients taking the tablets are an indication for stopping treatment immediately.

Packs
Slow-K tablets are available in Securitainers of 500.
PL0008/5039 Basic NHS Price £2.62.

® denotes registered trademark

Navidrex® K

(cyclopenthiazide 0.25mg plus 600mg KCl in a special slow- release core)

Baseline diuretic for hypertension or oedema

Description
Navidrex K tablets each contain 0.25mg cyclopenthiazide in an outer coat and 600mg potassium chloride BP in an inner slow-release core.

Dosage in hypertension
1 or 2 tablets (0.25 – 0.5mg) daily. Rarely, 6 tablets (1.5mg) daily may be required. The entire daily dose should be taken in the morning and it is important that the tablets be swallowed whole. In more severe hypertension it may be used in conjunction with other antihypertensive agents e.g. Trasicor® (oxprenolol), Ismelin® (guanethidine).
N.B. Since Navidrex K increases salt excretion it is usually possible to relax dietary salt restrictions.

Dosage in oedema
Initially 2–4 tablets (0.5 – 1mg) daily until a satisfactory clinical response is attained. The maximum effective dose is 6 tablets (1.5mg) daily, although this is rarely required.When a satisfactory clinical response is achieved, a maintenance dose of 1 or 2 tablets (0.25 – 0.5mg) daily or 2 tablets (0.5mg) on alternate days is usually adequate.

Side effects
Mild anorexia, nausea, constipation and diarrhoea, skin rashes and photosensitivity may occur. There have been reports of blood dyscrasias, including thrombocytopenia.

Precautions
In patients with some degree of renal impairment, a rise in blood urea can occur and in extreme cases result in an oliguric crisis. In such cases, either the dose should be reduced or the treatment interrupted temporarily. Prolonged doses of thiazides may bring about a decrease in glucose tolerance and precipitate a diabetic condition. In known diabetics the addition of Navidrex K to the treatment regime will almost certainly alter the insulin requirement.

In common with other thiazide diuretics, Navidrex K may precipitate an attack of gout in patients predisposed to this condition. The built-in potassium supplement helps to maintain electrolyte levels and prevent potassium depletion. However, prolonged treatment may induce hypokalaemia sufficient to necessitate the administration of additional potassium supplements. The patient should also be encouraged to take a potassium-rich diet.

Navidrex K tablets are designed to avoid the risks of gastrointestinal irritation. However, symptoms or signs which might indicate ulceration or obstruction of the small bowel in patients taking tablets or capsules containing potassium salts are indications for stopping treatment with such preparations immediately.

Contra-indications
Navidrex K is contra-indicated in patients suffering from chronic nephritis.

Packs
Navidrex K tablets are available in Securitainers of 100 and 500.
PL0008/5036 Basic NHS Price £0.98 and £4.76

Full prescribing information is available on request from CIBA Laboratories, Horsham,West Sussex.

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