

**Slow-K.**

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**Leeds castle**

Leeds castle in Kent, the scene of a recent international peace initiative, was built in 1120. The castle was the home of Henry VIII's first wife Catherine of Aragon and Elizabeth I was held prisoner there before becoming queen. The castle was restored in the 19th century and is now privately owned.



To the Medical and Pharmaceutical Professions

C I B A

# Slow-K®

## Prescribing Notes

### Description

Slow-K tablets each contain 600mg potassium chloride BP (equivalent to 8.06 mEq K<sup>+</sup>) in a slow-release wax core within a sugar coating. This special form of potassium substitution therapy is designed to avoid high localised concentrations of potassium chloride which might irritate or damage the mucosa.

### Indications

For the treatment and specific prevention of hypokalaemia especially in cases of the following kinds:

Where protracted or intensive diuretic medication is being given as treatment for hypertension or cardiac failure, and where diuretics have been prescribed to resolve massive oedema. Potassium substitution is of particular importance in patients undergoing concomitant digitalisation because hypokalaemia may cause hypersensitivity to digitalis.

Renal disease associated with increased potassium excretion e.g. nephrotic syndrome.

Liver cirrhosis, especially during diuretic therapy.

Gastro-intestinal disorders accompanied by potassium depletion e.g. chronic diarrhoea, repeated vomiting, ulcerative colitis, status post ileostomy.

Hypochloroemic alkalosis, cases in which a low salt diet or prolonged fasting have been imposed and patients receiving an unbalanced diet deficient in potassium.

Protracted or intensive treatment with corticosteroids, ACTH or corticosterone; Cushing's syndrome.

Initial treatment for megaloblastic anaemia.

Diabetic ketosis.

In these conditions Slow-K is particularly indicated if a diet rich in potassium cannot be guaranteed.

### Dosage

**Adults:** The dosage of Slow-K should be adapted to the cause, degree and duration of potassium depletion. 2-6 tablets are usually an adequate supplement. It is important that the tablets should be swallowed whole, and to ensure the tablets enter the stomach, taken with meals or with a tumbler of water.

In states of severe potassium deficiency, a higher dose of 9-12 tablets daily may be needed. According to the dosage of diuretic used and the needs of the individual patient, a dose ratio of one Slow-K tablet with 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, 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.

**Children:** At the discretion of the physician.

### Side effects

Side effects are rare with Slow-K as any excess potassium is rapidly excreted in the urine.

In rare cases, oral potassium preparations may provoke gastro-intestinal disturbances (nausea, vomiting, abdominal pains, diarrhoea) necessitating either a reduction in dosage or withdrawal of medication (see Precautions).

### Precautions

If a patient under treatment with Slow-K develops severe vomiting, severe abdominal pains or flatulence, or gastro-intestinal haemorrhage, the preparation should be withdrawn at once, because in the presence of an obstruction it could conceivably give rise to ulceration or perforation.

In patients suffering from impaired renal function, special care should be exercised when prescribing potassium salts owing to the risk of their producing hyperkalaemia. Monitoring of the serum electrolytes is particularly necessary in patients with diseases of the heart or kidneys.

To guard against the risk of hyperkalaemia, one should also refrain from administering potassium salts together with potassium-sparing diuretics such as aldosterone antagonists or triamterene.

In cases of metabolic acidosis, the hypokalaemia should be treated not with potassium chloride but with an alkaline potassium salt (e.g. potassium bicarbonate).

### Contra-indications

Advanced renal failure; untreated Addison's disease; acute dehydration; hyperkalaemia. All solid forms of potassium medication are contra-indicated in the presence of obstructions in the digestive tract (e.g. resulting from compression of the oesophagus due to dilation of the left atrium or from stenosis of the gut).

### Packs

Slow-K tablets are available in  
Securitainers of 500  
PL0008/5039

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

Basic NHS Price

£2.62

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