

Anti-Anginal Drugs

Class of Drug	Action	Side Effects	Nursing Implications	Other Info
<p style="text-align: center;">Nitrates & Nitrites</p> <p><u>Short acting:</u> Nitrostat, NTG -effect begins 30 sec -max effect 3 min up to 10 min -sublingual, oral, buccal, lingual aerosol -can take before angina-provoking event -to terminate attack or prevent acute attack</p> <p><u>Long acting:</u> Cardilate, Imdur (oral sustained release) -large first pass effect Nitro-Dur (topical) -effective for hours -oral (SR), buccal, topical</p>	<ul style="list-style-type: none"> -relaxes vascular smooth muscle in periphery -dilates postcapillary vessels--decreases venous return to heart -reduces L ventricle end-diastolic pressure (preload) -relaxes arterioles--results in decreases afterload -works via nitric oxide 	<ul style="list-style-type: none"> -headache (w/i minutes) -orthostatic hypotension -syncope, dizziness, weakness -flushed feeling -reflex tachycardia 	<ul style="list-style-type: none"> -asses nature of angina before treatment -monitor BP throughout tx -may develop tolerance -hypotensive effect with, alcohol, b-blockers, Ca channel blockers, antidepressants -avoid in head trauma, ICP or CVA patients -teaching; q5 X3-911 -lie down or sit while taking -protect tabs from light, heat, moisture -expiration date 3-6mos; fresh if "burning" for SL -rotate sites & remove old patch, prior to new patch -take nitro at first sign of pain 	<p>Buccal: place between cheek & upper gum No chewing tobacco. Do not sleep w/ tablet still in mouth. Replace if swallowed</p> <p>Chewable: Chew well, then hold in mouth for 2 min before swallowing.</p> <p>Lingual aerosol: Do not shake container. Spray 1-2 sprays under tongue. Close mouth. Avoid swallowing 1-2 min. q5 X 3-911.</p> <p>Topical patches: Do not trim or cut patches. Remove old before applying new. Avoid irritated skin. Patch free period to decrease tolerance.</p> <p>Topical ointments: Do not massage. Avoid hair. Rotate sites.</p>
<p style="text-align: center;">Beta blockers</p> <p>Nadolol (Corgard) Propranolol (Inderal)</p>	<ul style="list-style-type: none"> -decr. force of contraction & lowers the O2 demand. -blocks beta receptors in heart leads to decr. heart rate and decr. in O2 demand -decr. resistance in coronary circ -prevention of exercise induced tachycardia 	<ul style="list-style-type: none"> -sleep disturbance -fatigue -cold extremities -paresthesia -bronchospasm -depressed mood -sexual dysfunction -reduced exercise tolerance 	<ul style="list-style-type: none"> -inhibits glycogen breakdown;interferes w/ insulin & oral hypoglycemics -additive hypotensive effects -masks S/Sx of hypoglycemia -not for variant (vasospasm) angina 	<ul style="list-style-type: none"> -patients w/ asthma, diabetes or peripheral vascular dx better tolerate selective beta 1's -for prophylactic purposes; prevent death after MI & reduces anginal pain
<p style="text-align: center;">Calcium channel blockers</p> <p>Nifedipine (Procardia) Diltiazem (Cardizem) Verapamil (Calan)</p>	<ul style="list-style-type: none"> -decr. intracellular Ca & decr. oxygen demand -dilates coronary & peripheral arteries—decr. PVR -dilates coronary vessels by inhibiting contractility of coronary smooth muscle 	<ul style="list-style-type: none"> -constipation -HA, dizziness -bradycardia -orthostatic hypotension -agranulocytosis -edema 	<ul style="list-style-type: none"> -used for angina caused by vasospasm -acute & long term prevention of angina - NOT for unstable angina 	<ul style="list-style-type: none"> -good for those who are unable to use beta blockers -digitalis may accumulate w/ Ca channel blockers