

Drug Interaction Results










Selected Drugs: Acetaminophen , Acetylcysteine , Albuterol , Amikacin , Carbamazepine , Cefazolin , Cefepime , Clindamycin HCl , Codeine , Dexamethasone , Dipyrone , Enoxaparin Sodium , Fentanyl , Fludrocortisone Acetate , Fluticasone , Furosemide , Gabapentin , Hydrochlorothiazide , Hydrocortisone , Ipratropium Bromide , Irbesartan , Ketamine HCl , Labetalol , Lactulose , Levetiracetam , Mannitol , Meropenem , Methyldopa , Metoclopramide , Midazolam , NIFEdipine , Neostigmine , Nimodipine , Norepinephrine , Omeprazole , Phenytoin , Propofol , Valproic Acid , Vancomycin HCl , Vasopressin , Vecuronium Bromide , traMADol HCl










Severity: All



Documentation: All

Interaction Type: Drug-Drug

Drug-Drug Interactions (124)

Drugs:	Severity:	Documentation:	Summary:
CARBAMAZEPINE -- NIFEDIPINE	 <u>Contraindicated</u>	Excellent	Concurrent use of NIFEDIPINE and STRONG CYP3A4 INDUCERS may result in reduced NIFEdipine exposure and reduced efficacy of NIFEdipine.
NIFEDIPINE -- PHENYTOIN	 <u>Contraindicated</u>	Excellent	Concurrent use of NIFEDIPINE and STRONG CYP3A4 INDUCERS may result in reduced NIFEdipine exposure and reduced efficacy of NIFEdipine.
ACETAMINOPHEN -- CARBAMAZEPINE	 <u>Major</u>	Good	Concurrent use of ACETAMINOPHEN and CARBAMAZEPINE may result in an increased risk of acetaminophen hepatotoxicity and reduced acetaminophen exposure.
ALBUTEROL -- FUROSEMIDE	 <u>Major</u>	Fair	Concurrent use of ALBUTEROL and POTASSIUM-DEPLETING DIURETICS may result in an increased risk of ECG changes or hypokalemia.
ALBUTEROL -- HYDROCHLOROTHIAZIDE	 <u>Major</u>	Fair	Concurrent use of ALBUTEROL and POTASSIUM-DEPLETING DIURETICS may result in an increased risk of ECG changes or hypokalemia.
ALBUTEROL -- LABETALOL HYDROCHLORIDE	 <u>Major</u>	Fair	Concurrent use of ALBUTEROL and BETA-ADRENERGIC BLOCKERS may result in reduced efficacy of albuterol.
AMIKACIN SULFATE -- FUROSEMIDE	 <u>Major</u>	Fair	Concurrent use of AMIKACIN and FUROSEMIDE may result in increased amikacin plasma and tissue concentrations and additive ototoxicity and/ or nephrotoxicity.
AMIKACIN SULFATE -- MANNITOL	 <u>Major</u>	Fair	Concurrent use of AMIKACIN and IV MANNITOL may result in alteration of serum and tissue amikacin concentrations.
AMIKACIN SULFATE -- VANCOMYCIN HYDROCHLORIDE	 <u>Major</u>	Fair	Concurrent use of AMIKACIN and VANCOMYCIN may result in additive ototoxicity and/ or nephrotoxicity.















AMIKACIN SULFATE -- VECURONIUM BROMIDE	 Major	Good	Concurrent use of AMINOGLYCOSIDES and NONDEPOLARIZING NEUROMUSCULAR BLOCKERS may result in enhanced and/ or prolonged neuromuscular blockade which may lead to respiratory depression and paralysis.
CARBAMAZEPINE -- CLINDAMYCIN HYDROCHLORIDE	 Major	Fair	Concurrent use of CARBAMAZEPINE and CYP3A4 SUBSTRATES may result in reduced CYP3A4 substrate exposure and reduced efficacy of CYP3A4 substrate.
CARBAMAZEPINE -- CODEINE SULFATE	 Major	Fair	Concurrent use of CARBAMAZEPINE and CODEINE may result in reduced opioid efficacy, precipitation of opioid withdrawal, an increased risk of serotonin syndrome, an increased risk of respiratory depression, profound sedation, hypotension and syncope and reduced codeine exposure.
CARBAMAZEPINE -- DEXAMETHASONE	 Major	Fair	Concurrent use of CARBAMAZEPINE and DEXAMETHASONE may result in reduced dexAMETHasone exposure and reduced carBAMazepine exposure.
CARBAMAZEPINE -- FENTANYL	 Major	Fair	Concurrent use of CARBAMAZEPINE and FENTANYL may result in an increased risk of respiratory depression, profound sedation, hypotension and syncope, reduced exposure of fentaNYL and an increased risk of serotonin syndrome.
CARBAMAZEPINE -- FLUDROCORTISONE ACETATE	 Major	Fair	Concurrent use of CARBAMAZEPINE and CORTICOSTEROIDS may result in reduced corticosteroids exposure and reduced efficacy of corticosteroids.
CARBAMAZEPINE -- FLUTICASONE PROPIONATE	 Major	Fair	Concurrent use of CARBAMAZEPINE and CORTICOSTEROIDS METABOLIZED BY CYP3A may result in reduced corticosteroids exposure and reduced efficacy of corticosteroids.
CARBAMAZEPINE -- GABAPENTIN	 Major	Fair	Concurrent use of CARBAMAZEPINE and CNS DEPRESSANTS may result in an increased risk of CNS depression.
CARBAMAZEPINE -- HYDROCORTISONE	 Major	Fair	Concurrent use of CARBAMAZEPINE and HYDROCORTISONE may result in reduced hydrocortisone exposure and reduced efficacy of hydrocortisone.
CARBAMAZEPINE -- IRBESARTAN	 Major	Fair	Concurrent use of CARBAMAZEPINE and CYP2C9 SUBSTRATES may result in reduced CYP2C9 substrate exposure and reduced efficacy of CYP2C9 substrate.














CARBAMAZEPINE -- KETAMINE HYDROCHLORIDE	 Major	Fair	Concurrent use of CARBAMAZEPINE and CNS DEPRESSANTS THAT ARE CYP2B6 SUBSTRATES may result in reduced CYP2B6 substrate exposure and reduced efficacy of CYP2B6 substrate and an increased risk of respiratory depression, profound sedation, hypotension and syncope.
CARBAMAZEPINE -- LABETALOL HYDROCHLORIDE	 Major	Fair	Concurrent use of CARBAMAZEPINE and CYP2C19 SUBSTRATES may result in reduced CYP2C19 substrate exposure and reduced efficacy of CYP2C19 substrate.
CARBAMAZEPINE -- MIDAZOLAM	 Major	Good	Concurrent use of CARBAMAZEPINE and MIDAZOLAM may result in reduced midazolam exposure and reduced efficacy of midazolam, an increased risk of respiratory depression, profound sedation, hypotension and syncope.
CARBAMAZEPINE -- NIMODIPINE	 Major	Good	Concurrent use of CARBAMAZEPINE and NIMODIPINE may result in reduced nimodipine plasma concentrations and reduced nimodipine efficacy.
CARBAMAZEPINE -- OMEPRAZOLE	 Major	Good	Concurrent use of CARBAMAZEPINE and OMEPRAZOLE may result in increased carBAMazepine exposure, an increased risk of carBAMazepine toxicity, reduced omeprazole exposure and reduced efficacy of omeprazole.
CARBAMAZEPINE -- PHENYTOIN	 Major	Excellent	Concurrent use of CARBAMAZEPINE and FOSPHENYTOIN OR PHENYTOIN may result in reduced phenytoin or fosphenytoin (prodrug of phenytoin) exposure and reduced carBAMazepine exposure.
CARBAMAZEPINE -- PROPOFOL	 Major	Fair	Concurrent use of CARBAMAZEPINE and CNS DEPRESSANTS may result in an increased risk of CNS depression.
CARBAMAZEPINE -- VALPROIC ACID	 Major	Good	Concurrent use of CARBAMAZEPINE and VALPROIC ACID may result in reduced carBAMazepine exposure, increased carBAMazepine-10,11-epoxide exposure and reduced valproate exposure.
CARBAMAZEPINE -- VECURONIUM BROMIDE	 Major	Excellent	Concurrent use of CARBAMAZEPINE and VECURONIUM may result in reduced efficacy of vecuronium.
CARBAMAZEPINE -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of CARBAMAZEPINE and TRAMADOL may result in increased risk of serotonin syndrome and reduced traMADol exposure and an increased risk of respiratory depression, profound sedation, hypotension and syncope.












CEFEPIME HYDROCHLORIDE -- FUROSEMIDE	 Major	Good	Concurrent use of CEFEPIME and DIURETICS may result in an increased risk of nephrotoxicity.
CEFEPIME HYDROCHLORIDE -- HYDROCHLOROTHIAZIDE	 Major	Good	Concurrent use of CEFEPIME and DIURETICS may result in an increased risk of nephrotoxicity.
CODEINE SULFATE -- DEXAMETHASONE	 Major	Fair	Concurrent use of CODEINE and CYP3A4 INDUCERS may result in reduced codeine and morphine exposure, reduced opioid efficacy and precipitation of opioid withdrawal.
CODEINE SULFATE -- DIPYRONE	 Major	Fair	Concurrent use of CODEINE and CYP3A4 INDUCERS may result in reduced codeine and morphine exposure, reduced opioid efficacy and precipitation of opioid withdrawal.
CODEINE SULFATE -- FENTANYL	 Major	Fair	Concurrent use of CODEINE and SEROTONERGIC CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression and an increased risk of serotonin syndrome.
CODEINE SULFATE -- FUROSEMIDE	 Major	Fair	Concurrent use of CODEINE and DIURETICS may result in reduced diuretic efficacy.
CODEINE SULFATE -- GABAPENTIN	 Major	Good	Concurrent use of GABAPENTIN and CNS DEPRESSANTS may result in an increased risk of respiratory depression.
CODEINE SULFATE -- HYDROCHLOROTHIAZIDE	 Major	Fair	Concurrent use of CODEINE and DIURETICS may result in reduced diuretic efficacy.
CODEINE SULFATE -- IPRATROPIUM BROMIDE	 Major	Fair	Concurrent use of CODEINE and ANTICHOLINERGICS may result in an increased risk of paralytic ileus.
CODEINE SULFATE -- KETAMINE HYDROCHLORIDE	 Major	Fair	Concurrent use of CODEINE and CNS DEPRESSANTS may result in an increased risk of respiratory and CNS depression.
CODEINE SULFATE -- METOCLOPRAMIDE HYDROCHLORIDE	 Major	Fair	Concurrent use of METOCLOPRAMIDE and CNS DEPRESSANTS may result in increased risk of CNS depression.
CODEINE SULFATE -- MIDAZOLAM	 Major	Fair	Concurrent use of CODEINE and BENZODIAZEPINES may result in an increased risk of hypotension, respiratory depression, profound sedation, coma, and death.
CODEINE SULFATE -- PHENYTOIN	 Major	Fair	Concurrent use of CODEINE and CYP3A4 INDUCERS may result in reduced codeine and morphine exposure, reduced opioid efficacy and precipitation of opioid withdrawal.
CODEINE SULFATE -- PROPOFOL		Fair	Concurrent use of CODEINE and CNS

	 <u>Major</u>		DEPRESSANTS may result in an increased risk of respiratory and CNS depression.
CODEINE SULFATE -- TRAMADOL HYDROCHLORIDE	 <u>Major</u>	<u>Fair</u>	Concurrent use of CODEINE and SEROTONERGIC CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression and an increased risk of serotonin syndrome.
DEXAMETHASONE -- DIPYRONE	 <u>Major</u>	<u>Fair</u>	Concurrent use of NSAIDS and ORAL CORTICOSTEROIDS may result in increased risk of gastrointestinal ulcer or bleeding.
DEXAMETHASONE -- FENTANYL	 <u>Major</u>	<u>Good</u>	Concurrent use of FENTANYL and CYP3A4 INDUCERS may result in reduced exposure of fentaNYL, reduced efficacy of fentaNYL and/ or onset of opioid withdrawal symptoms.
DEXAMETHASONE -- NIFEDIPINE	 <u>Major</u>	<u>Good</u>	Concurrent use of NIFEDIPINE and CYP3A4 INDUCERS may result in reduced NIFEdipine exposure.
DEXAMETHASONE -- NIMODIPINE	 <u>Major</u>	<u>Fair</u>	Concurrent use of DEXAMETHASONE and NIMODIPINE may result in reduced nimodipine plasma concentrations and reduced nimodipine efficacy.
DEXAMETHASONE -- PHENYTOIN	 <u>Major</u>	<u>Fair</u>	Concurrent use of DEXAMETHASONE and STRONG CYP3A4 INDUCERS may result in reduced dexAMETHasone exposure.
DEXAMETHASONE -- TRAMADOL HYDROCHLORIDE	 <u>Major</u>	<u>Fair</u>	Concurrent use of TRAMADOL and CYP3A4 INDUCERS may result in reduced traMADol exposure and reduced efficacy of traMADol.
DIPYRONE -- ENOXAPARIN SODIUM	 <u>Major</u>	<u>Good</u>	Concurrent use of LOW-MOLECULAR-WEIGHT HEPARINS and NSAIDS may result in an increased risk of bleeding.
DIPYRONE -- FENTANYL	 <u>Major</u>	<u>Good</u>	Concurrent use of FENTANYL and CYP3A4 INDUCERS may result in reduced exposure of fentaNYL, reduced efficacy of fentaNYL and/ or onset of opioid withdrawal symptoms.
DIPYRONE -- FUROSEMIDE	 <u>Major</u>	<u>Good</u>	Concurrent use of FUROSEMIDE and NSAIDS may result in reduced diuretic effectiveness and possible nephrotoxicity.
DIPYRONE -- HYDROCHLOROTHIAZIDE	 <u>Major</u>	<u>Good</u>	Concurrent use of NSAIDS and THIAZIDE DIURETICS may result in reduced diuretic effectiveness and possible nephrotoxicity.
DIPYRONE -- HYDROCORTISONE	 <u>Major</u>	<u>Fair</u>	Concurrent use of NSAIDS and ORAL CORTICOSTEROIDS may result in increased risk of gastrointestinal ulcer or bleeding.




DIPYRONE -- NIFEDIPINE	Major	Good	Concurrent use of NIFEDIPINE and CYP3A4 INDUCERS may result in reduced NIFEdipine exposure.
DIPYRONE -- TRAMADOL HYDROCHLORIDE	Major	Fair	Concurrent use of TRAMADOL and CYP3A4 INDUCERS may result in reduced traMADol exposure and reduced efficacy of traMADol.
FENTANYL -- FUROSEMIDE	Major	Fair	Concurrent use of FENTANYL and DIURETICS may result in reduced diuretic efficacy.
FENTANYL -- GABAPENTIN	Major	Good	Concurrent use of GABAPENTIN and CNS DEPRESSANTS may result in an increased risk of respiratory depression.
FENTANYL -- HYDROCHLOROTHIAZIDE	Major	Fair	Concurrent use of FENTANYL and DIURETICS may result in reduced diuretic efficacy.
FENTANYL -- IPRATROPIUM BROMIDE	Major	Fair	Concurrent use of FENTANYL and ANTICHOLINERGICS may result in increased risk of urinary retention and/ or severe constipation, which may lead to paralytic ileus.
FENTANYL -- KETAMINE HYDROCHLORIDE	Major	Fair	Concurrent use of FENTANYL and CNS DEPRESSANTS may result in increased risk of profound sedation, respiratory depression, hypotension, coma and death.
FENTANYL -- METOCLOPRAMIDE HYDROCHLORIDE	Major	Fair	Concurrent use of METOCLOPRAMIDE and CNS DEPRESSANTS may result in increased risk of CNS depression.
FENTANYL -- MIDAZOLAM	Major	Fair	Concurrent use of FENTANYL and CNS DEPRESSANTS may result in increased risk of profound sedation, respiratory depression, hypotension, coma and death.
FENTANYL -- NIFEDIPINE	Major	Fair	Concurrent use of FENTANYL and NIFEDIPINE may result in an increased risk of severe hypotension and an increased fluid volume requirements.
FENTANYL -- PHENYTOIN	Major	Good	Concurrent use of FENTANYL and CYP3A4 INDUCERS may result in reduced exposure of fentaNYL, reduced efficacy of fentaNYL and/ or onset of opioid withdrawal symptoms.
FENTANYL -- PROPOFOL	Major	Fair	Concurrent use of FENTANYL and CNS DEPRESSANTS may result in increased risk of profound sedation, respiratory depression, hypotension, coma and death.
FENTANYL -- TRAMADOL HYDROCHLORIDE	Major	Fair	Concurrent use of FENTANYL and SEROTONERGIC CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression and an increased risk of serotonin syndrome.

FLUDROCORTISONE ACETATE -- PHENYTOIN	 Major	Good	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and CORTICOSTEROIDS may result in reduced corticosteroid exposure.
FLUTICASONE PROPIONATE -- PHENYTOIN	 Major	Good	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and CORTICOSTEROIDS may result in reduced corticosteroid exposure.
FUROSEMIDE -- IRBESARTAN	 Major	Fair	Concurrent use of FUROSEMIDE and ANGIOTENSIN RECEPTOR BLOCKERS may result in severe hypotension and deterioration in renal function, including renal failure.
FUROSEMIDE -- NOREPINEPHRINE BITARTRATE	 Major	Fair	Concurrent use of FUROSEMIDE and NOREPINEPHRINE may result in decreased arterial responsiveness (vasoconstricting effect) to norepinephrine.
FUROSEMIDE -- PHENYTOIN	 Major	Fair	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and FUROSEMIDE may result in reduced furosemide exposure.
FUROSEMIDE -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and DIURETICS may result in reduced efficacy of diuretics.
GABAPENTIN -- KETAMINE HYDROCHLORIDE	 Major	Good	Concurrent use of GABAPENTIN and CNS DEPRESSANTS may result in an increased risk of respiratory depression.
GABAPENTIN -- MIDAZOLAM	 Major	Good	Concurrent use of GABAPENTIN and CNS DEPRESSANTS may result in an increased risk of respiratory depression.
GABAPENTIN -- PROPOFOL	 Major	Good	Concurrent use of GABAPENTIN and CNS DEPRESSANTS may result in an increased risk of respiratory depression.
GABAPENTIN -- TRAMADOL HYDROCHLORIDE	 Major	Good	Concurrent use of GABAPENTIN and CNS DEPRESSANTS may result in an increased risk of respiratory depression.
HYDROCHLOROTHIAZIDE -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and DIURETICS may result in reduced efficacy of diuretics.
HYDROCORTISONE -- PHENYTOIN	 Major	Good	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and CORTICOSTEROIDS may result in reduced corticosteroid exposure.
IPRATROPIUM BROMIDE -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and ANTICHOLINERGICS may result in increased risk of urinary retention and/ or severe constipation leading to paralytic ileus.
KETAMINE HYDROCHLORIDE -- METOCLOPRAMIDE HYDROCHLORIDE	 Major	Fair	Concurrent use of METOCLOPRAMIDE and CNS DEPRESSANTS may

			result in increased risk of CNS depression.
KETAMINE HYDROCHLORIDE -- MIDAZOLAM	 Major	Fair	Concurrent use of KETAMINE and CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression.
KETAMINE HYDROCHLORIDE -- PROPOFOL	 Major	Fair	Concurrent use of KETAMINE and CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression.
KETAMINE HYDROCHLORIDE -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression.
MEROPENEM -- VALPROIC ACID	 Major	Excellent	Concurrent use of MEROPENEM and VALPROIC ACID may result in reduced valproic acid exposure and an increased risk of seizures and status epilepticus.
METOCLOPRAMIDE HYDROCHLORIDE -- MIDAZOLAM	 Major	Fair	Concurrent use of METOCLOPRAMIDE and CNS DEPRESSANTS may result in increased risk of CNS depression.
METOCLOPRAMIDE HYDROCHLORIDE -- PROPOFOL	 Major	Fair	Concurrent use of METOCLOPRAMIDE and CNS DEPRESSANTS may result in increased risk of CNS depression.
METOCLOPRAMIDE HYDROCHLORIDE -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of METOCLOPRAMIDE and CNS DEPRESSANTS may result in increased risk of CNS depression.
MIDAZOLAM -- PROPOFOL	 Major	Fair	Concurrent use of FOSPROPOFOL and BENZODIAZEPINES may result in additive cardiorespiratory effects.
MIDAZOLAM -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression.
NIFEDIPINE -- PROPOFOL	 Major	Good	Concurrent use of NIFEDIPINE and CYP3A4 INHIBITORS may result in increased NIFedipine exposure.
NIFEDIPINE -- VALPROIC ACID	 Major	Fair	Concurrent use of NIFEDIPINE and VALPROIC ACID may result in increased NIFedipine exposure.
NIMODIPINE -- PHENYTOIN	 Major	Good	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and NIMODIPINE may result in reduced niMODipine exposure and reduced efficacy niMODipine efficacy.
OMEPRAZOLE -- PHENYTOIN	 Major	Fair	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and OMEPRAZOLE may result in increased phenytoin exposure or fosphenytoin (prodrug of phenytoin), an increased risk of phenytoin or fosphenytoin toxicity (ataxia, hyperreflexia,

			nystagmus, tremor) and reduced omeprazole exposure.
PHENYTOIN -- VALPROIC ACID	 Major	Good	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and VALPROIC ACID may result in increased valproate exposure, altered phenytoin or fosphenytoin (prodrug of phenytoin) exposure and an increased risk of valproate-associated hyperammonemia.
PHENYTOIN -- VECURONIUM BROMIDE	 Major	Good	Concurrent use of FOSPHENYTOIN OR PHENYTOIN and VECURONIUM may result in reduced vecuronium exposure, reduced efficacy of vecuronium and an increased risk of resistance to the neuromuscular blocking action of the nondepolarizing neuromuscular blocking agents.
PHENYTOIN -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and CYP3A4 INDUCERS may result in reduced traMADol exposure and reduced efficacy of traMADol.
PROPOFOL -- VALPROIC ACID	 Major	Fair	Concurrent use of PROPOFOL and VALPROIC ACID may result in increased propofol exposure and risk of sedation or cardiorespiratory depression.
PROPOFOL -- TRAMADOL HYDROCHLORIDE	 Major	Fair	Concurrent use of TRAMADOL and CNS DEPRESSANTS may result in increased risk of respiratory and CNS depression.
ACETAMINOPHEN -- PHENYTOIN	 Moderate	Good	Concurrent use of ACETAMINOPHEN and PHENYTOIN may result in decreased acetaminophen effectiveness and an increased risk of hepatotoxicity.
ACETYLCYSTEINE -- CARBAMAZEPINE	 Moderate	Good	Concurrent use of ACETYLCYSTEINE and CARBAMAZEPINE may result in subtherapeutic carbamazepine levels.
CARBAMAZEPINE -- DIPYRONE	 Moderate	Fair	Concurrent use of CARBAMAZEPINE and CYP3A INDUCERS may result in reduced carBAMazepine exposure and reduced efficacy of carBAMazepine.
CARBAMAZEPINE -- FUROSEMIDE	 Moderate	Good	Concurrent use of CARBAMAZEPINE and SELECTED DIURETICS may result in hyponatremia.
CARBAMAZEPINE -- HYDROCHLOROTHIAZIDE	 Moderate	Good	Concurrent use of CARBAMAZEPINE and SELECTED DIURETICS may result in hyponatremia.
CARBAMAZEPINE -- LEVETIRACETAM	 Moderate	Good	Concurrent use of CARBAMAZEPINE and LEVETIRACETAM may result in symptoms of carbamazepine toxicity (nystagmus, ataxia, dizziness, double vision).

CLINDAMYCIN HYDROCHLORIDE -- VECURONIUM BROMIDE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of CLINDAMYCIN and VECURONIUM may result in vecuronium toxicity (respiratory depression).
DEXAMETHASONE -- HYDROCORTISONE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of HYDROCORTISONE and CYP3A4 INDUCERS may result in reduced hydrocortisone exposure.
DEXAMETHASONE -- VECURONIUM BROMIDE	 <u>Moderate</u>	<u>Good</u>	Concurrent use of VECURONIUM and DEXAMETHASONE may result in decreased vecuronium effectiveness; prolonged muscle weakness and myopathy.
DIPYRONE -- IRBESARTAN	 <u>Moderate</u>	<u>Excellent</u>	Concurrent use of ACE INHIBITORS AND ANGIOTENSIN RECEPTOR BLOCKERS and NSAIDS may result in reduced antihypertensive effect and renal dysfunction and/ or increased blood pressure.
DIPYRONE -- LABETALOL HYDROCHLORIDE	 <u>Moderate</u>	<u>Good</u>	Concurrent use of BETA-ADRENERGIC BLOCKERS and NSAIDS may result in reduced antihypertensive effect.
FLUDROCORTISONE ACETATE -- FUROSEMIDE	 <u>Moderate</u>	<u>Good</u>	Concurrent use of FLUDROCORTISONE and FUROSEMIDE may result in hypokalemia.
FLUDROCORTISONE ACETATE -- HYDROCHLOROTHIAZIDE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of HYDROCHLOROTHIAZIDE and FLUDROCORTISONE may result in hypokalemia and subsequent cardiac arrhythmias.
FUROSEMIDE -- HYDROCORTISONE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of FUROSEMIDE and HYDROCORTISONE may result in hypokalemia.
FUROSEMIDE -- VECURONIUM BROMIDE	 <u>Moderate</u>	<u>Good</u>	Concurrent use of FUROSEMIDE and VECURONIUM may result in increased or decreased neuromuscular blockade.
HYDROCHLOROTHIAZIDE -- HYDROCORTISONE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of HYDROCHLOROTHIAZIDE and HYDROCORTISONE may result in hypokalemia and subsequent cardiac arrhythmias.
HYDROCORTISONE -- NEOSTIGMINE METHYLSULFATE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of HYDROCORTISONE and NEOSTIGMINE may result in decreased neostigmine effectiveness.
HYDROCORTISONE -- PROPOFOL	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of HYDROCORTISONE and CYP3A4 INHIBITORS may result in increased hydrocortisone exposure and an increased risk of hydrocortisone-related adverse reactions.
HYDROCORTISONE -- VECURONIUM BROMIDE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of VECURONIUM and HYDROCORTISONE may result in decreased vecuronium effectiveness; prolonged muscle weakness and myopathy.
LABETALOL HYDROCHLORIDE -- METHYLDOPA	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of LABETALOL and METHYLDOPA may result in exaggerated hypertensive response, tachycardia, or

			arrhythmias during physiologic stress or exposure to exogenous catecholamines.
LABETALOL HYDROCHLORIDE -- NIFEDIPINE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of NIFEDIPINE and BETA BLOCKERS may result in an increased risk of congestive heart failure, severe hypotension or exacerbation of angina.
MIDAZOLAM -- OMEPRAZOLE	 <u>Moderate</u>	<u>Fair</u>	Concurrent use of MIDAZOLAM and OMEPRAZOLE may result in benzodiazepine toxicity (CNS depression, ataxia, lethargy).
MIDAZOLAM -- PHENYTOIN	 <u>Moderate</u>	<u>Good</u>	Concurrent use of MIDAZOLAM and PHENYTOIN may result in decreased efficacy of midazolam.
NIMODIPINE -- VALPROIC ACID	 <u>Moderate</u>	<u>Good</u>	Concurrent use of NIMODIPINE and VALPROIC ACID may result in nimodipine toxicity (dizziness, headache, flushing, peripheral edema).

Definitions

Severity:



Contraindicated

The drugs are contraindicated for concurrent use.



Major

The interaction may be life-threatening and/or require medical intervention to minimize or prevent serious adverse effects.



Moderate

The interaction may result in exacerbation of the patient's condition and/or require an alteration in therapy.



Minor

The interaction would have limited clinical effects. Manifestations may include an increase in the frequency or severity of the side effects but generally would not require a Major alteration in therapy.



Unavailable

Severity ratings are not assigned for the content.

Documentation:

Excellent

Controlled studies have clearly established the existence of the interaction.

Good

Documentation strongly suggests the interaction exists, but well-controlled studies are lacking.

Fair

Available documentation is poor, but pharmacologic considerations lead clinicians to suspect the interaction exists; or, documentation is good for a pharmacologically similar drug.

Unavailable

Severity ratings are not assigned for the content.