**Week 3: Case Study Discussion**

**100**

Student's Name

Institutional Affiliation

Course Code and Name

Instructor's Name

Date

**Week 3: Case Study Discussion**

**What are your treatment goals for Margaret today?**

Since Clonidine results in adverse side effects, she will discontinue using them and start using hypertension medication instead.

**What is your pharmacological plan and rationale?**

Mild to moderate hypertension is usually treated using Aplha2. Since Margaret has reported that Clonidine is resulting in side undesirable effects such as headaches, difficulty urinating, and dry mouth, the medication should be discontinued, not abruptly, though, as that may interrupt the homoeostatic balance of the sympathetic nervous system, leading to more complications. Bonnard et al., 2020, Clonidine increases parasympathetic stimulation while decreasing renal vascular resistance and heart rate. Over the next week, Margaret should slowly decrease the quantity of Clonidine. As she had reported that she opted out of taking medication for the tremors because the tremors were not particularly bothersome before taking Clonidine. The tremors should subside after a week. Beta-adrenergic blockers (principally propranolol) and primidone are the first-line treatment for essential tremors (Alonso-Navarro et al., 2020). To avoid life-threatening hypertension, Margaret should first stop taking Clonidine before embarking on these adrenergic blockers as the two medications cannot be taken concurrently (Aryabiantara et al., 2018).

To treat Margaret’s’ hypertension, atenolol (brand name Tenormin) can be administered. It is a beta-1selective blocker that can be used with or without other medications. The medication works by blocking epinephrine, lowering heart rate, blood pressure, and strain on the heart. Margaret should take 25mg/day orally initiated for five days.

**Pick one medication from your response above and list five patient-centered teaching points for the medication.**

Medication: Atenolol

* use the medication as directed and tell your doctor if your symptoms do not improve.
* Store the medication at room temperature away from moisture, heat, and light. Keep the bottle tightly closed when not in use.
* Take the missed dose as soon as you remember. Skip the missed dose if it is almost time for your next scheduled dose. Do not take extra medicine to make up the missed dose.
* Follow the doctor's instructions about any restrictions on food, beverages, or activity.
* Using atenolol during pregnancy could harm the unborn baby. Tell your doctor if you are pregnant or if you become pregnant while using this medicine.

**Reference****s**

Alonso-Navarro, H., García-Martín, E., Agúndez, J. A. G., & Jiménez-Jiménez, F. J. (2020). Current and Future Neuropharmacological Options for the Treatment of Essential Tremor. *Current Neuropharmacology*, *18*(6), 518–537. https://doi.org/10.2174/1570159x18666200124145743

Aryabiantara, Iw., Sinardja, Ik., Jaya Sutawan, I. K., Sinardja, C., Parami, P., Ryalino, C., & Junaedi, M. (2018). Perioperative effects of co-administration of the propofol combined with Clonidine and ketamine. *Bali Journal of Anesthesiology*, *2*(3), 51. https://doi.org/10.15562/bjoa.v2i3.69

Bonnard, C., Wirth, T., Gebus, O., Fahrer, P., Montaut, S., Robelin, L., Tuzin, N., Tranchant, C., & Anheim, M. (2020). Clonidine GH stimulation test to differentiate MSA from idiopathic late-onset cerebellar ataxia: a prospective, controlled study. *Journal of Neurology*, *267*(3), 855–859. https://doi.org/10.1007/s00415-020-09737-z