

## FORMULARY

### Labetalol

<b>Class of Drug</b>	Antihypertensive with selective alpha-1 and non-selective beta-antagonist effects.
<b>Mechanism of Action</b>	Combines both selective, competitive, alpha- adrenergic blocking and non-selective, competitive, beta-adrenergic blocking activity in a single substance. The ratio of alpha-to beta- blocking has been estimated at 1:7 following intravenous administration. Due to the alpha 1 receptor blocking activity of labetalol, blood pressure is lowered more in the standing patient than in the supine position, and symptoms of postural hypotension can occur.
<b>Indications</b>	Severe hypertension.
<b>Contraindications</b>	Bronchial asthma. Cardiogenic shock. Greater than first degree heart block. Severe bradycardia. Other conditions associated with severe and prolonged hypotension. Patients with known hypersensitivity.
<b>Adverse Effects</b>	Fatigue, headache, paresthesia, syncope, orthostatic hypotension, ventricular dysrhythmias, nasal stuffiness, GI distress, sexual dysfunction, urinary retention, muscle spasm, bronchospasm, rash.
<b>Precautions</b>	Use with caution in patients with impaired hepatic or renal function since metabolism of the drug may be diminished.
<b>Dosing/Administration</b>	<b>Adult:</b> First dose of 20 mg slow IVP. May repeat every 10 min with additional doses of 40 mg and then 80 mg repeated at 80 mg until a maximum of 300 mg is administered. <b>Obstetrical:</b> 20 mg slow IVP (over 2 min). May repeat every 10 min with additional doses of 40 mg and then 80 mg until a maximum of 300 mg is administered. <b>Continuous Infusion:</b> Mix 200 mg in 250 mL of D5W and administer at 1 – 2 mg/min up to 60 mg/hour.
<b>Pregnancy Category</b>	C-Uncertain safety – animal studies show adverse effect but no human studies exist