Section: Drug Reference Page 1 of 1

Subject: DILTIAZEM (CARDIZEM®)

Section #: 348.10 Issue Date: March 21, 2011

Revision Date:

Approved By:

Michael Lozano, Jr., M.D., HCFR Medical Director

Diltiazem

1. CLASSIFICATION

a. Calcium channel blocker

2. ACTIONS / DESCRIPTIONS

- a. Slows cardiac conduction (negative dromotropic effects)
- b. Increases refractoriness in the AV node
- c. Slows AV conduction:
 - i. Repolarization is prolonged, resulting in increased refractory period
 - ii. No effect on fastcalcium channels of the "Bundle of His", atria, ventricles, or accessory pathways
- d. Causes coronary vasodilation
- e. Dilation of smooth muscle cells results in decrease vascular resistance and thus lower BP

3. INDICATIONS

- a. SVT
- b. Atrial fibrillation and atrial flutter

4. CONTRAINDICATIONS

- a. CHF
- b. 2nd and 3rd degree AV blocks
- c. Severe hypotension or cardiogenic shock
- d. Atrial fib/flutter associated with WPW
- e. Concomitant use of IV beta blockers
- f. VT or Wide Complex Tachycardia

5. PRECAUTIONS

- a. Increases levels of carbamazepine
- b. Cimetidine may inhibit diltiazem metabolism
- c. Diltiazem may increase digoxin levels

6. ADVERSE REACTIONS

- a. Hypotension
- b. 1st and 2nd degree AV blocks
- c. Bradycardia
- d. Chest pain
- e. CHF
- f. Ventricular dysrhythmias
- g. Syncope
- h. Asystole

7. INFORMATIONAL/DISCUSSION POINTS

- a. Blood pressure should be 90 to 100 mmHg
- b. Slow infusion
- c. Probably will control rate but not convert atrial fibrillation or flutter