

NHS Cheshire CCG

East Cheshire NHS Trust

Mid Cheshire Hospitals NHS Foundation Trust

Countess of Chester Hospital NHS Foundation Trust

Cheshire and Wirral Partnership NHS Foundation Trust



Amiodarone

Information for Patients

You have been commenced on a medication called amiodarone. The aim of this booklet is to provide you with information regarding the safe use and monitoring of amiodarone.

What is amiodarone?

Amiodarone belongs to a group of medication known as antiarrhythmics. It is used to regulate your heart rate and rhythm. Abnormal heart rhythms such as atrial fibrillation, ventricular tachycardia and atrial flutter can be treated using amiodarone. Taking amiodarone can reduce palpitations, dizziness and blackouts.

How should I take my amiodarone?

The usual starting dose is:

- Week 1: ONE 200mg tablet THREE times a day for 7 days
- Week 2: ONE 200mg tablet TWICE a day for 7 days
- Week 3: ONE 200mg tablet ONCE a day thereafter.

It is taken like this to quickly build up the levels in your body. Depending on how you react to the medication, the long term dose may be increased or decreased.

If possible you should take your tablets at the same time each day. Tablets should be swallowed whole and not crushed or chewed.

Do not stop taking this medication unless you have consulted your GP or Cardiology Specialist.

What should I do if I take too many tablets?

If you take too many tablets, then you should seek medical attention. You may experience the following; feeling dizzy, faint, confused, tired and vomiting.

What should I do if I miss a dose?

If you are currently taking your amiodarone once a day and forget to take a dose, take a dose as soon as you remember. DO NOT double up on the dose.

If you are currently taking your amiodarone two or three times a day, do not take the dose you missed and carry on with your next usual dose. DO NOT double up on the dose.

What are the side effects of amiodarone?

Some people can experience side effects when taking amiodarone.

Nausea, vomiting and taste disturbance may occur when you first start amiodarone. This usually wears off as the dose reduces. If this does not improve after several weeks then inform your GP.

Skin: Amiodarone may make your skin more sensitive to sunlight. If you are in direct sunlight, then wearing adequate sun-cream, protective clothing and a hat can help to protect your skin. Avoid sunbeds or sunlamps. It may be necessary to continue these precautions because amiodarone can remain in your body for several months after you have stopped taking the medication.

Amiodarone can occasionally result in your skin looking slightly grey/blue. This normally resolves once you have stopped taking it but please inform your GP if you notice discolouration to your skin.

Eyes: As you are aware small unharmed deposits can form on the cornea of the eye. You may notice the effect of these eye deposits if you are looking at bright lights at night time. For example, you may see a yellow halo when driving a car. Please inform your GP who can refer you to an Ophthalmologist.

If you develop blurred or decreased vision, then contact your GP who will refer you to an Ophthalmologist for further investigation. Do not operate machinery or drive if you have blurred or decreased vision.

It is advised that patients taking amiodarone should undertake an annual review with an optician due to the side effects that can occur. Unless you are entitled to a free NHS eye test, this would have to be paid for privately by yourself.

Lungs: Amiodarone can occasionally cause thickening of the lung tissue. If you feel that you have developed unexplained shortness of breath, a new cough, tiredness, please contact your GP or Cardiology Specialist.

Heart: Amiodarone may slow the heart rate too much, resulting in tiredness and dizziness. If you notice these symptoms, contact your GP or Cardiology Specialist.

Liver: Amiodarone can rarely cause problems with the function of the liver. Your GP will be monitoring your liver function every 6 months. If you notice a yellow discolouration of your skin or eyes, please contact your GP or Cardiology Specialist.

Thyroid: Amiodarone contains iodine which can have an effect on your thyroid. It can result in the thyroid producing either more or less thyroid hormone. Your Cardiology Specialist would have checked your thyroid function prior to commencing amiodarone and your GP will be monitoring your thyroid function every 6 months.

You should contact your GP if you notice that you feel tired or noticed that you have gained weight as this may be a sign of less thyroid hormone being produced (Hypothyroidism).

You should also contact your GP if you notice that you feel restless, experience increased sweating and have lost weight, this may be a sign of too much thyroid hormone being produced (Hyperthyroidism).

Both of these can be treated, but you may need to reduce the dose of amiodarone or stop taking it.

Amiodarone can remain in the body for a few months after stopping taking it, therefore it is important to remember you may still experience some of these side effects.

For a full list of side effects, please read the patient information leaflet provided in the box of amiodarone tablets supplied.

Can I take other medicines while taking amiodarone?

Amiodarone can affect other medications. Always highlight to your healthcare professional or Pharmacist that you are taking amiodarone to ensure that any new medication/herbal medication/over the counter medication can be taken safely with amiodarone.

Amiodarone can interact with warfarin, especially when you first start amiodarone. It is important that your INR (international normalized ratio) is checked more frequently during this time and the anticoagulation clinic is informed that you have commenced amiodarone.

Grapefruit juice should be avoided when taking amiodarone as this can increase your chance of getting side effects.

Amiodarone can remain in the body for a few months after stopping taking it, therefore it is important to keep this in mind when commencing new medications for the next few months after stopping amiodarone.

Monitoring

Your Cardiology Specialist will have completed tests including blood tests to ensure that your liver, thyroid and kidneys are working well and that amiodarone is suitable to be started. Once you are stable on amiodarone, your Cardiology Specialist will ask your GP to continue to prescribe this medication.

Your GP will continue to prescribe the amiodarone and to monitor tests including blood tests every 6 months. They will also inform your Cardiology Specialist if there are any concerns and refer back to them, if required.

Other information

- You should not take amiodarone if you are pregnant, thinking of becoming pregnant or breastfeeding. Speak to your GP or Cardiology Specialist if you are thinking of becoming pregnant.
- If you are having an operation or dental treatment, tell the person carrying out your treatment that you are taking amiodarone.
- The amount of alcohol should be limited (Government recommended guidelines state no more than 14 units a week for men and women) whilst taking amiodarone as this may increase your chance of having problems with your liver.
- British Heart Foundation website can provide information upon arrhythmias and medication: www.bhf.org.uk

If you need further information, please contact your GP or Cardiology Specialist.

The information in this booklet has been taken from the British National Formulary, Summary of Product Characteristics for each drug (available on www.emc.medicines.org.uk) and the British Heart Foundation website can provide further information.

This information is available in audio, Braille, large print and other languages. To request a copy, please ask a member of staff.

