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Relenza

(Zanamivir) - GlaxoSmithKline

THERAPEUTIC CLASS
Neuraminidase inhibitor

DEA CLASS
RX

INDICATIONS
Treatment of uncomplicated acute illness due to influenza A and B virus in adults and pediatric patients ≥7 yrs of age who have been symptomatic for no more than 2 days. Prophylaxis of influenza in adults and pediatric patients ≥5 yrs of age.

ADULT DOSAGE
Adults: Treatment: 2 inh (10mg) q12h for 5 days. Take 2 doses on 1st day at least 2 hrs apart, then 12 hrs apart (eg, am and pm) at approximately the same time each day on subsequent days. Prophylaxis: Administer at same time each day. Household Setting: 2 inh (10mg) qd for 10 days. Community Outbreaks: 2 inh (10mg) qd for 28 days.

PEDIATRIC DOSAGE
Pediatrics: Treatment: ≥7 Yrs: 2 inh (10mg) q12h for 5 days. Take 2 doses on 1st day at least 2 hrs apart, then 12 hrs apart (eg, am and pm) at approximately the same time each day on subsequent days. Prophylaxis: Administer at same time each day. ≥5 Yrs: Household Setting: 2 inh (10mg) qd for 10 days. Adolescents: Community Outbreaks: 2 inh (10mg) qd for 28 days.

HOW SUPPLIED
Powder, Inhalation: 5mg/inh [4 blisters/disk]

CONTRAINDICATIONS
History of allergic reaction to milk proteins.

WARNINGS/PRECAUTIONS
Not a substitute for early influenza vaccination on an annual basis. Emergence of resistance mutations can decrease drug effectiveness; consider available information on influenza drug susceptibility patterns and treatment effects when deciding whether to use therapy. Not recommended for treatment or prophylaxis of influenza in individuals with underlying airways disease (eg, asthma, chronic obstructive pulmonary disease) due to risk of bronchospasm. Serious cases of bronchospasm reported; d/c if bronchospasm or decline in respiratory function develops. Allergic-like reactions (eg, oropharyngeal edema, serious skin rashes, anaphylaxis) reported; d/c and institute appropriate treatment if an allergic reaction occurs or is suspected. Delirium and abnormal behavior leading to injury, primarily in pediatric patients, reported; monitor for abnormal behavior and evaluate risks and benefits of continuing treatment if neuropsychiatric symptoms occur. Serious bacterial infections may begin with influenza-like symptoms or may coexist with or occur during the course of influenza; treatment does not prevent these complications. Must not be made into an extemporaneous solution for administration by nebulization or mechanical ventilation. Administer only using provided device. Carefully evaluate the ability of young children to use the delivery system if therapy is considered.

ADVERSE REACTIONS
Diarrhea, nausea, sinusitis, ear/nose/throat infections, viral respiratory infections, cough, headaches, nasal signs/symptoms, throat/tonsil discomfort and pain.

DRUG INTERACTIONS
Avoid administration of live attenuated influenza vaccines within 2 weeks before or 48 hrs after zanamivir, unless medically indicated.

PREGNANCY
Category C, caution in nursing.

MECHANISM OF ACTION
Neuraminidase inhibitor; inhibits influenza virus neuraminidase, affecting release of viral particles.

PHARMACOKINETICS
Absorption: C_{max}=17-142ng/mL, 43ng/mL (median, pediatric patients); T_{max}=1-2 hrs; AUC=111-1364ng•hr/mL, 167ng•hr/mL (median, pediatric patients). **Distribution:** Plasma protein binding (<10%). **Elimination:** Urine (unchanged), feces (unabsorbed); $T_{1/2}$=2.5-5.1 hrs.

ASSESSMENT
Assess for history of allergic reaction to milk proteins, airways disease, underlying medical conditions, pregnancy/nursing status, and for possible drug interactions.

MONITORING

Monitor for signs/symptoms of bronchospasm, allergic reactions, neuropsychiatric events (eg, delirium, abnormal behavior, seizures, hallucinations), and other adverse reactions.

PATIENT COUNSELING

Inform of the risk of bronchospasm; advise to stop and contact physician if increased respiratory symptoms (eg, worsening wheezing, SOB, or other signs/symptoms of bronchospasm) are experienced. If taking inhaled bronchodilators, counsel to use bronchodilators before taking the medication. Advise of the risk of neuropsychiatric events and to contact physician if experiencing signs of unusual behavior during treatment. Instruct patients in use of the delivery system; if prescribed for children, instruct parents or caregivers on proper administration and supervision. Inform that this medication does not reduce the risk of transmission of influenza to others.

ADMINISTRATION/STORAGE

Administration: Oral inhalational route. Do not puncture any blister until taking a dose using the Diskhaler. Refer to PI for further administration instructions. **Storage:** 25°C (77°F); excursions permitted to 15-30°C (59-86°F).