

# Cardizem (diltiazem)

Indications: Paroxysmal Supraventricular Tachycardia (PSVT) and Atrial Fibrillation and Flutter

Standard Concentration: 1mg/ml

Stable for 24 hours at room temperature or under refrigeration.

Infusion rates in ml/hr is the same as mg/hr because concentration is 1mg/ml.

In patients with low body weights (less than 80kg), bolus doses should be based on mg/kg doses.

Otherwise, use the 20 or 25mg doses.

Dosing:

Paroxysmal Supraventricular Tachycardia (PSVT)

20mg (0.25mg/kg if < 80kg) dose given over 2 minutes

If no conversion to normal sinus rhythm, may give 25mg (0.35mg/kg) may be given 15 minutes after the initial dose.

Atrial Fibrillation and Flutter

20mg (0.25mg/kg if < 80kg) dose given over 2 minutes

If desired reduction in ventricular rate does not occur, may give 25mg (0.35mg/kg) may be given 15 minutes after the initial dose.

If continued reduction in ventricular rate is required, initiate infusion at 10mg/hr. Infusion rate may be increased by increments of 5mg/hr up to 15mg/hr. Maximum rate is 15mg/hr. Some patients may require lower doses such as 5mg/hr.

**Adverse effects:** Bradycardia, AV block, worsen CHF, itching or burning at injection site, vasodilation, flushing, hypotension, swelling and/or edema, headache, dizziness, muscle weakness

**Drug Interactions:**

1. Diltiazem can increase digoxin concentrations
2. Diltiazem can increase cyclosporine concentrations and should be used with caution in patients stabilized on cyclosporine.
3. Combination of diltiazem and beta-blockers can cause CHF, excessive bradycardia, hypotension, cardiac conduction, abnormalities, or heart block.

**Contraindications:** AV block, hypotension, sick sinus syndrome, Wolff-Parkinson-White syndrome, and Lown-Ganong-Levine syndrome.

**Nursing Considerations:** Monitor: BP, HR, RR, ECG