Amoxapine (a MOKS a peen)

Amlodipine and Olmesartan

Use Major depressive disorder (unipolar): Antidepressant, Tricyclic Pharmacologic Category

Related Information

Pregnancy Considerations [US Boxed Warning]: Pregnancy Risk Factor

Adverse Reactions

Effects on Dental Treatment Key adverse event(s) related to dental treatment: Patients may experience orthostatic hypotension as they stand up after treatment; especially if lying in dental chair for extended periods of time. Use caution with sudden changes in position during and after dental treatment.

Fewer reports of gingival hyperplasia with amlodipine than with other CCBs (usually resolves upon discontinuation); consultation with physician is suggested.

Effects on Bleeding No information available to require special precautions

Adverse Reactions Reactions/percentages reported with combination product; also see individual agents

Mechanism of Action

Amlodipine: Directly acts on vascular smooth muscle to produce peripheral arterial vasodilatation reducing peripheral vascular resistance and blood pressure. Olmesartan: Blocks the vasoconstrictor and aldosterone-secreting effects of angiotensin II.

Pregnancy Risk Factor D

Pregnancy Considerations [US Boxed Warning]: Drugs that act on the renin-angiotensin system can cause injury and death to the developing fetus. Discontinue as soon as possible once pregnancy is detected. See individual agents.

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Local Anesthetic/Vasoconstrictor Precautions Use with caution; epinephrine and levonorgestrin have been shown to have an increased pressor response in combination with TCAs. Amoxapine is one of the drugs confirmed to prolong the QT interval and is accepted as having a risk of causing torsade de pointes. The risk of drug-induced torsade de pointes is extremely low when a single QT interval prolonging drug is prescribed. In terms of epinephrine, it is not known what effect vasoconstrictors in the local anesthetic regimen will have in patients with a known history of congenital prolonged QT interval or in patients taking any medication that prolongs the QT interval. Until more information is obtained, it is suggested that the clinician consult with the physician prior to the use of a vasoconstrictor in suspected patients, and that the vasoconstrictor (epinephrine, mepivacaine and levonorgestrin [Carbocaine® 2% with Neo-Cobefrin®]) be used with caution.

Effects on Dental Treatment Key adverse event(s) related to dental treatment: Xerostomia and changes in salivation (normal salivary flow resumes upon discontinuation). Long-term treatment with TCAs, such as amoxapine, increases the risk of caries by reducing salivation and salivary buffer capacity.

Effects on Bleeding May cause thrombocytopenia

Adverse Reactions

10%: Central nervous system: Drowsiness (14%) Gastrointestinal: Xerostomia (14%), constipation (12%) 1% to 10%: Cardiovascular: Edema, palpitations Central nervous system: Anxiety, ataxia, confusion, dizziness, EEG pattern changes, excitement, fatigue, headache, insomnia, nervousness, nightmares, restlessness Dermatologic: Diaphoresis, skin rash Endocrine & metabolic: Increased serum prolactin Gastrointestinal: Increased appetite, nausea Neuromuscular & skeletal: Tremor, weakness Ophthalmic: Blurred vision (7%)<1% (Limited to important or life-threatening): Abdominal pain, accommodation disturbance, agranulocytosis, alopecia, altered serum glucose, angle-closure glaucoma, anorexia, atrial arrhythmia, atrial fibrillation, breast hypertrophy, decreased libido, delayed micturition, diarrhea, disorientation, eosinophilia, epigastric distress, extrapyramidal reaction, fever, flatulence, galactorrhea, hallucination, heart block, hepatic insufficiency, hepatitis, hypersensitivity reaction, hypotension, hyperthermia, hypomania, hypotension, impotence, increased intraocular pressure, increased libido, jaundice, lack of concentration, lactic acidosis, leukopenia, menstrual disease, mydriasis, myocardial infarction, nasal congestion, neuroleptic malignant syndrome, numbness, painful ejaculation, pancreatitis, paralytic ileus, paresthesia, parotid swelling, petechia, pruritus, purpura, seizures, SIADH, skin photosensitivity, syncope, tachycardia, tardive dyskinesia, testicular swelling, thrombocytopenia, tingling sensation, tinnitus, unusual taste, urinary frequency, urination retention, urticaria, vasculitis, vomiting, weight gain, weight loss

Mechanism of Action Reduces the reuptake of serotonin and norepinephrine. The metabolite, 7-OH-amoxapine has significant dopamine receptor blocking activity similar to antipsychotic agents.

postpartum; large individual patient variability was observed (Naito 2015b).

Untreated chronic maternal hypertension is associated with adverse events in the fetus, infant, and mother. If treatment for hypertension during pregnancy is needed, agents other than amlodipine are preferred (ACOG 2013).

Amlodipine and Olmesartan

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Related Information

AmLODIPine on page 114 Olmesartan on page 992

Brand Names: US Azor

Pharmacologic Category Angiotensin II Receptor Blocker; Antianginal Agent; Antihypertensive; Calcium Channel Blocker; Calcium Channel Blocker, Dihydropyridine

Use Hypertension: Management of hypertension (monotherapy or with other antihypertensive agents).

Local Anesthetic/Vasoconstrictor Precautions No information available to require special precautions

Effects on Dental Treatment Key adverse event(s) related to dental treatment: Xerostomia and changes in salivation (normal salivary flow resumes upon discontinuation). Long-term treatment with TCAs, such as amoxapine, increases the risk of caries by reducing salivation and salivary buffer capacity.

Effects on Bleeding May cause thrombocytopenia

Adverse Reactions

>10%: Cardiovascular: Peripheral edema (dose related: 18% to 26%) Frequency not defined (limited to important or life-threatening): Anaphylaxis, hypotension, nocturia, orthostatic hypotension, palpitations, pruritus, skin rash, urinary frequency

Mechanism of Action

Amlodipine: Directly acts on vascular smooth muscle to produce peripheral arterial vasodilatation reducing peripheral vascular resistance and blood pressure. Olmesartan: Blocks the vasoconstrictor and aldosterone-secreting effects of angiotensin II.

Pregnancy Risk Factor D

Pregnancy Considerations [US Boxed Warning]: Drugs that act on the renin-angiotensin system can cause injury and death to the developing fetus. Discontinue as soon as possible once pregnancy is detected. See individual agents.

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Related Information

Dentin Hypersensitivity, Acid Erosion, High Caries Index, Management of Alveolar Osteitis, and Xerostomia on page 1548 Vasoconstrictor Interactions With Antidepressants on page 1608 Pharmacologic Category Antidepressant, Tricyclic (Secondary Amine)

Use Major depressive disorder (unipolar): Treatment of unipolar major depression, including depression with psychotic features