alvimopan (al-vi-mo-pan)

**Classification**
Therapeutic: gastric stimulant
Pharmacologic: opioid antagonists

**Pregnancy Category B**

**Indications**
Speed time to upper/lower GI recovery following partial bowel resection surgery with primary anastomosis.

**Action**
Acts peripherally as an opioid receptor antagonist which speeds recovery of bowel function after partial large or small bowel resection surgery with anastomosis surgery.

**Pharmacokinetics**

**Absorption:** 6% absorbed following oral administration.

**Distribution:** Does not cross the blood-brain barrier.

**Protein Binding:** alvimopan—80% bound to albumin; metabolite—94% bound to albumin.

**Metabolism and Excretion:** Converted by bacterial flora in the GI tract to an active metabolite; elimination is mostly via biliary secretion, followed by conversion by bacterial flora. Elimination of unabsorbed drug and metabolites is via feces and urine.

**Half-life:** alvimopan—10–17 hr; metabolite—10–18 hr.

**TIME/ACTION PROFILE (blood levels)**

<table>
<thead>
<tr>
<th>ROUTE</th>
<th>ONSET</th>
<th>PEAK</th>
<th>DURATION</th>
</tr>
</thead>
<tbody>
<tr>
<td>PO</td>
<td>unknown</td>
<td>2 hr</td>
<td>12 hr</td>
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</tbody>
</table>

**Contraindications/Precautions**

**Contraindicated in:** Therapeutic doses of opioid analogues for more than 7 consecutive days before initiation of alvimopan; severe hepatic impairment or end-stage renal disease.

**Use Cautiously in:**
- More than 3 doses of opioids within the wk prior to surgery (increased sensitivity to effects and adverse reactions including abdominal pain, nausea, vomiting, and diarrhea).
- Severe, moderate, or mild hepatic or renal impairment (risk of adverse reactions). Japanese patients (may have an increased risk of adverse reactions). Geri: May have 7 sensitivity to effects:

**Interactions**

**Drug-Drug:**
- Avoid use if therapeutic opioid doses used during prior wk.
- Use cautiously if more than 3 doses have been used.

**Route/Dosage**

**PO (Adults):**
- 12 mg for 30 min–5 hr prior to surgery, then 12 mg twice daily for up to 15 doses.

**NURSING IMPLICATIONS**

**Assessment**
- Assess bowel sounds and frequency, quantity, and consistency of stools periodically during therapy.
- Lab Test Considerations: May cause anemia and hypokalemia.

**Potential Nursing Diagnoses**
Constipation (Indications)

**Implementation**
- Must be administered only during hospitalization. Only available in hospitals enrolled in the Entereg Access Support and Education (E.A.S.E.) program.
- PO: Administer twice daily without regard to food for no more than 7 days.

**ADVERSE REACTIONS: Side Effects**

**CV:** MI.

**GI:** constipation, dyspepsia, flatulence.

**F and E:** hypokalemia.

**GU:** urinary retention.

**Hemat:** anemia.

**MS:** back pain.

**POTENTIAL NURSING DIAGNOSES**
Constipation (Indications)

**DIAGNOSTIC TEST CONSIDERATIONS**

**DISCONTINUED**

**DISCONTINUED.**
Patient/Family Teaching

- Explain purpose of alvimopan to patient.
- Advise patient to notify health care professional if they have taken long-term or intermittent opioid pain therapy, including any use of opioids in the week prior to receiving alvimopan.

Evaluation/Desired Outcomes

- Resolution of postoperative ileus following bowel resection.

Why was this drug prescribed for your patient?