rimantadine (ri-man-ta-deen)
Flumadine
Classification
Therapeutic: antivirals
Pregnancy Category C

Indications

Action
Diminishes replication of influenza A virus by inhibiting uncoating of the virus. Therapeutic Effects: When given prophylactically, prevents infection with influenza A virus. When administered within 48 hr of onset of infection, decreases the duration of fever and other associated symptoms.

Pharmacokinetics
Absorption: Well absorbed after oral administration.
Distribution: Unknown.
Metabolism and Excretion: Mostly metabolized by the liver; 25% excreted unchanged in urine.
Half-life: 25 hr (range 13–65 hr).

Contraindications/Precautions
Contraindicated in: Hypersensitivity to rimantadine or amantadine; Lactation.
Use Cautiously in: History of seizures; Severe hepatic or renal disease (dose recommended if CrCl <30 mL/min); Geri: May be at risk for GI effects; OB: Safety not established.

Adverse Reactions/Side Effects

Interactions
Drug-Drug: **Aspirin and acetaminophen may** **increase** levels. May interfere with efficacy of intranasal influenza virus vaccine; do not administer within 48 hr before or 2 wk after.

Route/Dosage
PO (Adults): Prevention—100 mg twice daily (duration range = 11 days–6 wk). Treatment—100 mg twice daily for 7 days.
PO (Geriatric Patients, Patients with Severe Hepatic or Severe Renal Impairment [CrCl <30 mL/min]): Prevention—100 mg daily.
PO (Children 10–16 yr): Prevention—100 mg twice daily (duration range = 5–6 wk).
PO (Children 5–9 yr): Prevention—5 mg/kg/day as a single dose (not to exceed 150 mg/day) (duration range = 5–6 wk).

NURSING IMPLICATIONS
Assessment
Monitor respiratory status (rate, breath sounds, sputum) and temperature periodically. Report symptoms to physician. Monitor ECG in patients with history of cardiac disease. Report symptoms of GI irritation: Nausea and vomiting may be indications of early toxicity.

Potential Nursing Diagnoses
- Risk for infection (Indications)
- Acute pain (GI irritation)

Implementation
- Do not administer within 48 hr before or 2 wk after administration of intranasal influenza virus vaccine (FluMist).
- Consider available information on influenza drug susceptibility patterns and treatment effects before using rimantadine.
- PO: Do not administer last dose of medication near bedtime; this drug may produce insomnia in some patients.

Patient/Family Teaching
- Advise patient to take medication as directed at evenly spaced times for full course of therapy, even if feeling well. Take missed doses as soon as possible unless almost time for next dose; do not double up on missed doses.

"Genetic Implication: CAPI TALS indicate **life-threatening**, underlines indicate most frequent. Strikethrough indicates discontinued.

"Contraindicated in: Hypersensitivity to rimantadine or amantadine."
May cause dizziness. Advise patient to avoid driving or other activities that require alertness until response to the drug is known.

Advise patient to consult health care professional about receiving a flu vaccination.

Inform patient that frequent mouth rinses, good oral hygiene, and sugarless gum or candy may decrease dry mouth.

Advise patient to consult health care professional before taking OTC medications or herbal products, especially aspirin or acetaminophen, or drinking alcoholic beverages.

Instruct patient and family to notify health care professional if influenza symptoms occur.

Evaluation/Desired Outcomes

Avoidance of or reduction in symptoms associated with influenza A infection.

Why was this drug prescribed for your patient?