

## Sotalol (Betapace, Sorine) Considerations for Use\*

US/FDA Approved Indications: Heart Rhythm Control for Atrial Fibrillation

<b>Black Box Warning*</b>	<b>Patients should be in a facility for at least 3 days with ECG monitoring, cardiac resuscitation available, and CrCl calculated when initiating or re-initiating. Do not substitute Betapace for Betapace AF. Abrupt cessation may exacerbate angina pectoris and MI.</b>
<b>Mechanism of Action</b>	Prolongs cardiac repolarization (Class III antiarrhythmic properties).
<b>Dosing<sup>†</sup></b>	<p><u>Maintenance</u>: 80 to 320 mg PO every 12 hrs, based on QTC interval and renal function</p> <p><u>Hepatic Impairment</u>: No adjustments needed</p> <p><u>Renal Impairment</u>: CrCl 40-60 mL/min: dose every 24 hours CrCl &lt; 40 mL/min: contraindicated</p>
<b>Contraindications</b>	<ul style="list-style-type: none"> <li>• Asthma</li> <li>• AV block</li> <li>• Bradycardia</li> <li>• decompensated heart failure</li> <li>• hypokalemia</li> <li>• pulmonary edema</li> <li>• QT prolongation</li> <li>• renal failure</li> <li>• sick sinus syndrome</li> </ul>
<b>Major Side Effects</b>	torsades de pointes, HF, bradycardia
<b>Dosage forms and Strengths</b>	<p><u>PO</u>: 80, 120, 160, 240 mg tablets</p> <p><u>IV</u>: 150mg/10ml solution for injection</p>
<b>Special Notes</b>	<p>Non-selective beta-blocker. Avoid in patients with asthma.</p> <p>Potassium and magnesium levels should be within normal range prior to initiating and during therapy.</p> <p>To minimize the risk of induced arrhythmia, patients initiated or re-initiated on sotalol should be placed for a minimum of 3 days (on their maintenance dose) in a facility that can provide cardiac resuscitation and continuous electrocardiographic monitoring.</p> <p>Monitor serum creatinine, magnesium, potassium, heart rate, blood pressure; EKG.</p> <p>Has many drug interactions.</p> <p>Abrupt cessation may precipitate angina, MI, arrhythmias, or rebound HTN; discontinue by tapering over 1-2 weeks.</p> <p>Do not substitute Betapace® for Betapace AF®</p>
<b>Counseling</b>	<p>Do not abruptly discontinue without physician's advice.</p> <p>Report angina or signs/symptoms of congestive heart failure, new or worsened arrhythmias, or other cardiac dysfunction.</p> <p>Consult with a healthcare provider prior to new drug use (including OTC and herbals).</p>

\*Refer to prescribing information for more complete information.

†Dosages given in the table may differ from those recommended by the manufacturers.

### Sources:

1. American College of Cardiology (ACC), American Heart Association (AHA), and the European Society of Cardiology (ESC). *ACC/AHA/ESC 2006 Guidelines for the Management of Patients With Atrial Fibrillation*. Washington, DC: American College of Cardiology.
2. Heart Rhythm Society. *AF360 Pocket Guide: Practical Rate and Rhythm Management of Atrial Fibrillation*. 2010, Washington, DC: Heart Rhythm Society.
3. *Tarascon Pocket Pharmacopoeia*®2012.