**Medication Audit Checklist - Acamprosate (Campral®)**

Reviewer:  
Date:  
Class:  

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<th>Audit number:</th>
<th>Client number:</th>
<th>Age (yrs):</th>
<th>Gender (M/F):</th>
<th>Admission date:</th>
<th>Ordering Provider:</th>
<th>Comments</th>
<th>Physician review required?</th>
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### INDICATIONS

1) Maintenance of abstinence in patients with alcohol use disorder who are abstinent at treatment initiation

### CONTRAINDICATIONS

1) Hypersensitivity to acamprosate or any of its components  
2) Severe renal impairment (creatinine clearance ≤ 30 mL/min)

### PRECAUTIONS TO CONSIDER

Use of acamprosate does not eliminate or diminish withdrawal symptoms

_Pregnancy and Breastfeeding_

1) Pregnancy: Use in pregnancy should weigh the potential benefits vs. potential risks  
2) Nursing mothers: Use with caution; it is unknown if acamprosate is excreted in human milk

### DRUG INTERACTIONS OF MAJOR SIGNIFICANCE

1) Naltrexone  
2) Antidepressants

### SPECIAL POPULATIONS

1) Renal impairment: Reduce dose (see dosing below)  
2) Geriatric use: Dosage adjustments may be necessary for elderly with impaired renal function  
3) Pediatric use: Acamprosate has not been evaluated in the pediatric population

### ADVERSE REACTIONS

1) Anorexia  
2) Diarrhea  
3) Flatulence  
4) Nausea  
5) Anxiety  
6) Depression
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7) Dry mouth  
8) Insomnia  
9) Paresthesia  
10) Pruritis  
11) Sweating  
12) Headache  
13) Back pain  

**PATIENT MONITORING**  
1) Comprehensive Metabolic Panel (renal function) – baseline and as clinically indicated  
2) Pregnancy test – baseline and as clinically indicated  
3) Monitor for emergence of worsening depression, suicidal ideation, or suicidal behavior  

**DOSING**  
1) Alcohol use disorder – 666 mg three times daily; a lower dose may be effective in some patients  
2) Renal impairment: Moderate renal impairment (creatinine clearance of 30-50 mL/min) – reduce dose to 333 mg three times daily; severe renal impairment (creatinine clearance ≤ 30 mL/min) – avoid use