

## Medication Audit Checklist- Acamprosate (Campral®)

Reviewer:

Date:

Class:

Audit number: Client number: Age (yrs): Gender (M/F): Admission date: Ordering Provider:	Comments	Physician review required?	
		Yes	No
<b>INDICATIONS</b>			
1) Maintenance of abstinence in patients with alcohol use disorder who are abstinent at treatment initiation			
<b>CONTRAINDICATIONS</b>			
1) Hypersensitivity to acamprosate or any of its components			
2) Severe renal impairment (creatinine clearance $\leq$ 30 mL/min)			
<b>PRECAUTIONS TO CONSIDER</b>			
Use of acamprosate does not eliminate or diminish withdrawal symptoms			
<i>Pregnancy and Breastfeeding</i>			
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			
<b>DRUG INTERACTIONS OF MAJOR SIGNIFICANCE</b>			
1) Naltrexone			
2) Antidepressants			
<b>SPECIAL POPULATIONS</b>			
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			
<b>ADVERSE REACTIONS</b>			
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			
<b>PATIENT MONITORING</b>			
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			
<b>DOSING</b>			
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			