Drug Information Table Methylxanthines – theophylline (Theolair, Theochron, Theo-24) Therapeutic Use Administration

Long-term management of chronic asthma as well as chronic bronchitis and emphysema.	 If a dose is missed, do not double the dose. Chew chewable tablets thoroughly. Do not crush or chew sustained-release or entericcoated preparations. Maintain scheduled interval between doses. 	
Side/Adverse Effects	Interventions	Patient Instructions
 Rare at therapeutic levels When therapeutic levels are exceeded: Restlessness, insomnia 	Monitor plasma drug levels.	 Reduce or eliminate caffeine intake. Have periodic laboratory testing of drug levels.
Nausea, vomiting, diarrhea	Monitor plasma drug levels.	Have periodic laboratory testing of drug levels.
When reaches toxic levels: Seizures	 Monitor plasma drug levels. Discontinue drug therapy. Give activated charcoal to decrease absorption. Prepare to initiate anticonvulsant therapy and institute seizure precautions. 	Stop taking the drug and notify provider if experience seizure.
Dysrhythmias	 Monitor plasma drug levels. Discontinue drug therapy. Monitor heart rate and rhythm. Give antidysrhythmics to restore heart rate and rhythm. Initiate anticonvulsant therapy and institute seizure precautions. 	Stop taking the drug and notify provider if begin experiencing dysrhythmias.
Contraindications	Precautions	Interactions
 Cardiac disorders that cannot withstand myocardial stimulation Severe liver or renal impairment 	 Heart disease Liver dysfunction Acute pulmonary edema Hyperthyroidism Diabetes mellitus Peptic ulcer disease 	 Cimetidine (Tagamet), some fluoroquinolones, and caffeine increase the risk of toxicity. Phenobarbital, phenytoin (Dilantin), and nicotine increase metabolism of theophylline.