

Spironolactone: information for families

Spironolactone belongs to a group of medicines called diuretics. It is commonly used alongside another medicine called furosemide to reduce fluid overload, so reducing the amount of work the heart has to do to pump blood around the body. This information sheet from Great Ormond Street Hospital (GOSH) explains what spironolactone is, how it is given and some of the possible side effects. Each person reacts differently to medicines, so your child will not necessarily suffer every side effect mentioned. If you have any questions or concerns, please ask your doctor, nurse or pharmacist or telephone one of the contact numbers on this information sheet.

Spironolactone works by making the kidneys produce more urine (wee), so your child may have to go to the toilet more often. It also prevents potassium being lost in the urine. It is commonly prescribed for children with heart or kidney problems causing excess fluid in the body.

Spironolactone is 'unlicensed' for use in children. You can be assured that your doctor has only prescribed an 'unlicensed' medicine because they think that the medicine will benefit your child and no licensed alternative is available.

How is it given?

Spironolactone is given by mouth up to three times a day with or after food. It is available as tablets and a liquid preparation.

Tablets come in doses of 25mg, 50mg and 100mg. If your child is on a proportion of a tablet, you should disperse the tablets in a specific amount of water. You should then draw up the correct volume of liquid using the oral syringe provided and squirt it in the inside of your child's cheek.

The liquid preparation comes in 5mg/ml, 10mg/5ml, 25mg/5ml, 50mg/5ml and 100mg/5ml strengths. You should use the oral syringe provided to draw up the correct amount of liquid and squirt it in the inside of your child's cheek. Your doctor, nurse or pharmacist will have explained to you how to obtain the correct dose before you leave hospital.

Please note that some of these strengths may not be available locally so you should always tell the pharmacist the strength of your child's usual medicine.

Who should not take spironolactone?

People with the following conditions should discuss taking this medicine with their doctor.

- Hypersensitivity to spironolactone or its ingredients
- High calcium (hypercalcaemia) or high salt (hyponatraemia) blood levels
- Addison's disease



- Pregnant, could be pregnant, planning to become pregnant or breastfeeding

What are the side effects?

If any of these side effects are severe or carry on for a long time, please tell your doctor.

- Stomach ache, diarrhoea, skin rash
- Breast tenderness and enlargement in both boys and girls, although this will go away once spironolactone is stopped
- Irregular periods in girls
- Feelings of weakness or drowsiness

Spironolactone and other medicines

Some medicines can interact with spironolactone, altering how well it works. Always check with your doctor or pharmacist before giving your child any other medicines, including herbal or complementary medicines. The following medicines should only be given alongside spironolactone on the advice of your doctor but the dosages may need to be altered.

- ACE inhibitors
- Alpha blockers
- Pain relief medicines such as non-steroidal anti-inflammatory drugs (NSAIDs) including indometacin
- Angiotensin II receptor antagonists
- Anti-arrhythmics
- Certain antibacterials, including erythromycin and rifampicin
- Anti-depressants including St John's wort
- Anti-epileptics including carbamazepine and phenytoin
- Anti-fungals including itraconazole or ketoconazole
- Anti-psychotic medicines including lithium

- Certain anti-viral medicines including nelfinavir, ritonavir and saquinavir
- Atomoxetine
- Barbiturates including phenobarbital
- Beta blockers
- Cardiac glycosides
- Ciclosporin and tacrolimus
- Potassium salts

Important

- Spironolactone in a liquid preparation may not be available from your local pharmacist but it can be ordered for you. This may take a little longer so remember to order a repeat prescription in plenty of time.
- When you receive your new supply of spironolactone, check the strength of the tablets or liquids and the dosage before giving it to your child.
- Keep medicines in a safe place where children cannot reach them
- Keep the tablets or liquid at room temperature, away from bright light or direct sunlight and away from heat. Do not store in a fridge.
- If you forget to give your child a dose and it is within a few hours of when the dose was due, give it as soon as you remember. Otherwise, do not give this dose but take the next dose when it is due. Do not give a double dose.
- If your child vomits after taking the medicine, inform the doctor or nurse as your child may need to take another one. Do not give them another tablet without first informing your doctor.
- If your doctor decides that your child should stop taking spironolactone or it passes the expiry date, return any remaining tablets or liquid to your pharmacist. Do not flush them down the toilet or throw them away.

Useful numbers

- GOSH switchboard: 020 7405 9200
- Pharmacy medicines information: 020 7829 8608 (Monday to Friday from 9am to 5pm)



Disclaimer

Please read this information sheet from GOSH alongside the patient information leaflet (PIL) provided by the manufacturer. If you do not have a copy of the manufacturer's patient information leaflet please talk to your pharmacist. A few products do not have a marketing authorisation (licence) as a medicine and therefore there is no PIL.

For children in particular, there may be conflicts of information between the manufacturer's patient information leaflet (PIL) and guidance provided by GOSH and other healthcare providers. For example, some manufacturers may recommend, in the patient information leaflet, that a medicine is not given to children aged under 12 years. In most cases, this is because the manufacturer will recruit adults to clinical trials in the first instance and therefore the initial marketing authorisation (licence) only covers adults and older children.

For new medicines, the manufacturer then has to recruit children and newborns into trials (unless the medicine is not going to be used in children and newborns) and subsequently amend the PIL with the approved information. Older medicines may have been used effectively for many years in children without problems but the manufacturer has not been required to collect data and amend the licence. This does not mean that it is unsafe for children and young people to be prescribed such a medicine 'off-licence/off-label'. However, if you are concerned about any conflicts of information, please discuss with your doctor, nurse or pharmacist.

