

Prolonged use of large doses of analgesic mixtures containing phenacetin has been associated with the development of renal papillary necrosis (see Effects on the Kidneys, p.98) and transitional-cell carcinoma of the renal pelvis.

Porphyria. Phenacetin is considered to be unsafe in patients with porphyria because it has been shown to be porphyrinogenic in animals.

Uses and Administration

Phenacetin, a para-aminophenol derivative, has analgesic and antipyretic properties. It was usually given with aspirin, caffeine, or codeine but is now little used because of adverse haematological effects and nephrotoxicity.

Preparations

Proprietary Preparations (details are given in Part 3)

Multi-ingredient: Cz.: Dinyll; Mironalf; Hung.: Antineuralgica; Dolor:

Phenazone (BAN, rINN)

Analgésine; Antipyrin; Antipyrine; Azophenum; Fenatsoni; Fenazon; Fenazona; Fenazonas; Phénazone; Phenazonum; Phenyl-dimethylpyrazolonone. 1,5-Dimethyl-2-phenyl-4-pyrazolin-3-one.

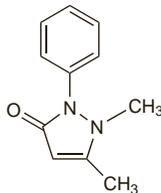
Феназон

$C_{11}H_{12}N_2O = 188.2$.

CAS — 60-80-0.

ATC — N02BB01.

ATC Vet — QN02BB01.



Pharmacopoeias. In Eur. (see p.vii), Jpn, and US.

Ph. Eur. 6.2 (Phenazone). White or almost white crystalline powder or colourless crystals. Very soluble in water, in alcohol, and in dichloromethane. Protect from light.

USP 31 (Antipyrine). Colourless crystals or white crystalline powder. Is odourless. Very soluble in water; freely soluble in alcohol and in chloroform; sparingly soluble in ether. Solutions are neutral to litmus. Store in airtight containers.

Phenazone and Caffeine Citrate

Antipyrino-Coffeinum Citricum; Fenazona y citrato de cafeína; Migrenin; Phenzone and Caffeine Citrate.

Феназон и Кофеина Цитрат

Description. Phenazone and caffeine citrate is a powder usually containing phenazone 90%, caffeine 9%, and citric acid monohydrate 1%.

Pharmacopoeias. In Jpn.

Phenazone Salicylate

Antipyrin Salicylate; Fenatsonsaliysaatti; Fenazona salicilato; Fenazonsalicylat; Phenazoni Salicylas; Salipyrin.

Феназона Салицилат

$C_{11}H_{12}N_2O_3 \cdot C_7H_6O_3 = 326.3$.

CAS — 520-07-0.

Pharmacopoeias. In Fr:

Adverse Effects and Precautions

Phenazone is liable to give rise to skin eruptions and in susceptible individuals even small doses may have this effect. Hypersensitivity reactions and nephrotoxicity have been reported. Large oral doses may cause nausea, drowsiness, coma, and convulsions.

Effects on the blood. Phenazone can cause haemolytic anaemia in certain individuals with a deficiency of G6PD.¹ Episodes of agranulocytosis were reported² in 6 women using a cream containing phenazone; all recovered on withdrawal.

1. Pranker TAJ. Hemolytic effects of drugs and chemical agents. *Clin Pharmacol Ther* 1963; **4**: 334-50.
2. Delannoy A, Schmit J-C. Agranulocytosis after cutaneous contact with phenazone. *Eur J Haematol* 1993; **50**: 124.

Effects on the kidneys. Phenazone is considered nephrotoxic but only limited clinical information on phenazone is available because it has been mainly used with phenacetin.¹

1. Prescott LF. Analgesic nephropathy: a reassessment of the role of phenacetin and other analgesics. *Drugs* 1982; **23**: 75-149.

Effects on the skin. In a summary¹ of 77 cases of fixed drug eruption phenazone derivatives were considered to be the causative agent in 9 of the 14 cases that were severe generalised reactions.

1. Stubb S, et al. Fixed drug eruptions: 77 cases from 1981 to 1985. *Br J Dermatol* 1989; **120**: 583.

Hypersensitivity. Immediate allergic reactions to phenazone have been reported.^{1,2} In one patient leucopenia was detected 8 weeks later.¹

1. Kadar D, Kalow W. Acute and latent leukopenic reaction to antipyrine. *Clin Pharmacol Ther* 1980; **28**: 820-22.
2. McCrea JB, et al. Allergic reaction to antipyrine, a marker of hepatic enzyme activity. *DICP Ann Pharmacother* 1989; **23**: 38-40.

Porphyria. Phenazone is considered to be unsafe in patients with porphyria because it has been shown to be porphyrinogenic in animals.

Interactions

Phenazone affects the metabolism of some other drugs and its own metabolism is affected by other drugs that increase or reduce the activity of liver enzymes.

Pharmacokinetics

Phenazone is absorbed from the gastrointestinal tract and peak plasma concentrations are obtained within 1 to 2 hours of ingestion. It is distributed throughout the body fluids with concentrations in the saliva and breast milk reaching about the same levels as those in plasma. Less than 10% is bound to plasma proteins and it has an elimination half-life of about 12 hours. Phenazone is metabolised in the liver to 3 major metabolites 3-hydroxymethylphenazone, 4-hydroxyphenazone, and norphenazone. Phenazone, 3-hydroxymethylphenazone, and glucuronidated metabolites are all excreted in the urine. A small portion may be eliminated via the bile.

Uses and Administration

Phenazone is an NSAID (p.99) and has been given orally; phenazone and caffeine citrate and phenazone salicylate have similarly been given orally as analgesics.

Solutions containing about 5% of phenazone have been used topically as ear drops in disorders such as acute otitis media (but see below).

Phenazone is used as a test for the activity of drug-metabolising enzymes in the liver.

Diagnosis and testing. A review¹ of normal plasma-phenazone pharmacokinetics, urinary metabolite disposition, and total body clearances of phenazone in the presence of cirrhosis, fatty liver, hepatitis, and cholestasis.

1. St Peter JV, Awani WM. Quantifying hepatic function in the presence of liver disease with phenazone (antipyrine) and its metabolites. *Clin Pharmacokinet* 1991; **20**: 50-65.

Otitis media. There appears to be no justification¹ for the inclusion of phenazone in topical preparations used in treating acute otitis media (p.182). It is presumably included in such preparations because it is believed to have a local anti-inflammatory and, therefore, analgesic action. It would, however, seem unlikely that phenazone would have any action on the skin of the intact tympanic membrane and, therefore, on the pain which is due primarily to the stretching and distention of the membrane.

1. Carlin WV. Is there any justification for using phenazone in a local application prescribed for the treatment of acute otitis media? *BMJ* 1987; **294**: 1333.

Preparations

USP 31: Antipyrine and Benzocaine Otic Solution; Antipyrine, Benzocaine, and Phenylephrine Hydrochloride Otic Solution.

Proprietary Preparations (details are given in Part 3)

Austral: Erasol; **Ger:** Aequiton-P; Migrane-Kranit; Mono Migranin; **Hong Kong:** Tropex; **Irl:** Tropex; **Pol:** Antotalgin; **S.Afr:** Aurone; Oto-Phen; **Venez:** Otamina.

Multi-ingredient: Arg.: Aqua Lent Colirio; Bajumol; Bideon; Cerosponn GS; Clansoft; Colina; Cristalomina; Irix Kalopsi; Leroid; Otalex G; Otocalmia Biotic; Otocero; Otocuri; Otonorthia; Sincerum; Usualix Visus; **Austral:** Auralgan; **Austria:** Asthma Efeum; Coffo Selt; Otalgan; Spalt; **Belg:** Hemorhinol; Otocalmine; Ouate Hemostatique; Tymalgine; **Braz:** Anestiesol; Espasmalgon; Osmotil; Otovix; **Canad:** Auralgan; **Cz:** Otipax; **Denm:** Koffisal; **Fr:** Brulex; HEC; Otipax; **Ger:** Cofeemed NF; Migranin; Otalgan; **Hung:** Otipax; **India:** Tytin; **Israel:** Anaesthetic Ear Drops; Otidin; **Ital:** Otalgan; Otomidone; Otopyx; **Neth:** Spalt N; **Norw:** Antineuralgica; Fanalgin; **NZ:** Auralgan; Degest 2; **Philipp:** Auralgan; **Port:** Otocalma; Profrin-A; **Rus:** Otopyx (Отинак); **S.Afr:** Auraly; Aurasept; Aurone Forte; Covancaine; Ilvico; Otised; Oto-Phen Forte; Universal Earache Drops; **Singapore:** HEC; Tropex; **Spain:** AB FE; Epistaxol; Otalgan; Otosedol; Pomada Heridas; Quimpedor; Tabletas Quimpe; **Swed:** Doleron; Koffazon; **Switz:** Otalgan; Otopyx; Otosan; Otothincin; Seranex sans codeine; Spedalgin sans codeine; **Thai:** Auralgan; **USA:** Allergen; Auralgan; Auroguard Otic; Auroto; Cy-Gesic; Otocalm; Tympagesic; **Venez:** Audocainat; Otan; Otanol; Otulin; Otodon; Otofrin.

Phenazopyridine Hydrochloride

(BANM, USAN, rINN)

Chloridrato de Fenazopiridina; Fenazopiridin Hidroklorür; Fenazopyridyn chlorowodorek; Hidrocloruro de fenazopiridina; NC-150; NSC-1879; Phénazopyridine, Chlorhydrate de; Phenazopyridin Hydrochloridum; W-1655. 3-Phenylazopyridine-2,6-dimethylamine hydrochloride.

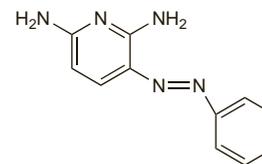
Феназопиридина Гидрохлорид

$C_{11}H_{11}N_5 \cdot HCl = 249.7$.

CAS — 94-78-0 (phenazopyridine); 136-40-3 (phenazopyridine hydrochloride).

ATC — G04BX06.

ATC Vet — QG04BX06.



(phenazopyridine)

Pharmacopoeias. In Pol. and US.

USP 31 (Phenazopyridine Hydrochloride). A light or dark red to dark violet crystalline powder. Is odourless or with a slight odour. Soluble 1 in 300 of cold water, 1 in 20 of boiling water, 1 in 59 of alcohol, 1 in 331 of chloroform, and 1 in 100 of glycerol; very slightly soluble in ether. Store in airtight containers.

Removal of stains. Phenazopyridine stains may be removed from fabric by soaking in a 0.25% solution of sodium dithionite.

Adverse Effects

Phenazopyridine hydrochloride has caused gastrointestinal adverse effects, headache, and rashes. Hepatotoxicity, haemolytic anaemia, methaemoglobinemia, and acute renal failure have also been reported, generally associated with overdose or with therapeutic doses in patients with renal impairment. Crystal deposits of phenazopyridine have formed in the urinary tract.

Abnormal coloration of body tissues or fluids may occur. Urine is tinged either orange or red and underclothes are apt to be stained.

Effects on the CNS. A case of aseptic meningitis, with distinct episodes of fever and confusion, was associated with the use of phenazopyridine.¹

1. Herlihy TE. Phenazopyridine and aseptic meningitis. *Ann Intern Med* 1987; **106**: 172-3.

Overdosage. Report of a 2-year-old child who developed cyanosis and methaemoglobinemia after ingesting at most three 200-mg tablets of phenazopyridine hydrochloride.¹

1. Gold NA, Bithoney WG. Methemoglobinemia due to ingestion of at most three pills of pyridium in a 2-year-old: case report and review. *J Emerg Med* 2003; **25**: 143-8.

Precautions

Phenazopyridine hydrochloride is contra-indicated in patients with renal impairment or severe hepatitis and should be used with caution in those with G6PD deficiency. Treatment should be stopped if the skin or sclerae become discoloured; this may indicate accumulation as a result of impaired renal excretion. Phenazopyridine may interfere with urinalysis based on colour reactions or spectrometry.

Staining of contact lenses may occur.

Pharmacokinetics

Phenazopyridine hydrochloride is absorbed from the gastrointestinal tract. It is excreted mainly in the urine; up to 65% may be excreted as unchanged phenazopyridine and 18% as paracetamol.

Uses and Administration

Phenazopyridine is an azo dye that exerts an analgesic effect on the mucosa of the urinary tract and is used to provide symptomatic relief of pain and irritability in conditions such as cystitis and prostatitis (see p.2178 and p.2181, respectively), and urethritis (p.199). Phenazopyridine hydrochloride has been given in usual oral doses of about 200 mg three times daily after food. If given with an antibacterial for the treatment of urinary-tract infections (p.199), treatment should usually not exceed 2 days, although lower doses have been given as part of a combined preparation for at least a week.

Urinary-tract infections. There is currently no well-substantiated role for phenazopyridine in the treatment of urinary-tract infections and its adverse effects are potentially serious.¹

1. Zelenitsky SA, Zhanel GG. Phenazopyridine in urinary tract infections. *Ann Pharmacother* 1996; **30**: 866-8.

Preparations

USP 31: Phenazopyridine Hydrochloride Tablets.

Proprietary Preparations (details are given in Part 3)

Arg: Cistalgina; **Belg:** Uroprine; **Braz:** Pyridium; Pyrisep; Urologin; Urotrif; **Canad:** Phenazo; Pyridium; **Chile:** Nazamit; Nordox; Pyridium; **Hong Kong:** CP-Pyridine; Phenacidine; Pyridium; **India:** Pyridium; **Indon:** Pyridium; Urogetix; **Israel:** Sedural; **Mex:** Alvena; Azofur; Biofenna; Pirimir; Urezol; **Philipp:** Azomir; **Pol:** Nefreclil; **S.Afr:** Pyridium; **Singapore:** Urogesic; **Thai:** Amillazo; Anazo; Phendindine; Suredium; **USA:** Azo-Standard; Bantium; Prodiur; Pyridiate; Pyridium; Re-Azo; Urogesic; **Venez:** Pyridium.

Multi-ingredient: Arg.: Bacti-Uril; Nor 2; Pripier Plus; Uro-Bactrim; Uro-tem Dol; **Braz:** Minazol; Uro-Baxapril; Urobiotic; Uroctrin; Urofen; Uropac; Uropielon; **Chile:** Uro-Micnovio; **Ger:** Urospasmon; **India:** Nephrogesic; **Mex:** Azo-Uronalin; Azo-Wintomylin; Azogen; Mictasol; Nalixone; Naxilan-Plus; Pirifur; Urovec; Vodelan; **Spain:** Mictural Sedante; **Turk:** Azo Gantrisin; Azosilin; Urisept; **USA:** Phenazopyridine Plus; Pyridium Plus; Trelidium Plus; Urelief Plus; Urobiotic-250; **Venez:** Azo-Mandelamine; Bacteval.

Phenylbutazone (BAN, rINN)

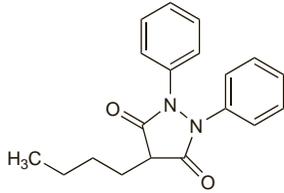
Butadione; Fenilbutazon; Fenilbutazona; Fenilbutazonas; Fenylbutazon; Fenyllobutazon; Fenyllobutazoni; Phénylbutazone; Phénylbutazonum. 4-Butyl-1,2-diphenylpyrazolidine-3,5-dione.

Фенилбутозон

$C_{19}H_{20}N_2O_2 = 308.4$.

CAS — 50-33-9 (phenylbutazone); 129-18-0 (phenylbutazone sodium); 4985-25-5 (phenylbutazone piperazine).
ATC — M01AA01; M02AA01.

ATC Vet — QM01AA01; QM02AA01.



Pharmacopoeias. In *Eur.* (see p.vii), *Jpn.* and *US*.

Ph. Eur. 6.2 (Phenylbutazone). A white or almost white, crystalline powder. Practically insoluble in water; sparingly soluble in alcohol; it dissolves in alkaline solutions. Protect from light.

USP 31 (Phenylbutazone). A white to off-white, odourless, crystalline powder. Very slightly soluble in water; soluble in alcohol; freely soluble in acetone and in ether. Store in airtight containers.

Profile

Phenylbutazone, a pyrazolone derivative, is an NSAID (p.96). However, because of its toxicity and in particular its adverse haematological reactions (see Effects on the Blood, below), it is not used as a general analgesic or antipyretic. Although phenylbutazone is effective in almost all musculoskeletal and joint disorders including ankylosing spondylitis, acute gout, osteoarthritis, and rheumatoid arthritis, it should only be used in acute conditions where less toxic drugs have failed. Initial oral doses of up to 600 mg daily in divided doses have been used in the treatment of rheumatic disorders although up to 800 mg daily may be required in acute gout. After 1 to 3 days, the dose should be reduced to the minimum effective amount, which may be as little as 200 mg daily; treatment should be given for the shortest period possible, up to a usual maximum of 1 week. Reduced doses are recommended in elderly patients.

In some countries phenylbutazone has also been given as a rectal suppository and applied topically for musculoskeletal pain and in soft-tissue injury. It has also been given intramuscularly as the sodium salt. Other salts of phenylbutazone that have been used in musculoskeletal, joint, and soft-tissue disorders include the calcium, meglalate, and piperazine salts.

Breast feeding. No adverse effects have been seen in breast-fed infants whose mothers were given phenylbutazone, and the American Academy of Pediatrics considers¹ that it is therefore usually compatible with breast feeding. However, when phenylbutazone had been available in the UK the *BNF* had advised that phenylbutazone should be avoided during breast feeding as small amounts are distributed into breast milk.

1. American Academy of Pediatrics. The transfer of drugs and other chemicals into human milk. *Pediatrics* 2001; **108**: 776–89. Correction. *ibid.*: 1029. Also available at: <http://aappolicy.aappublications.org/cgi/content/full/pediatrics%3b108/3/776> (accessed 08/11/07)

Effects on the blood. Both phenylbutazone¹⁻³ and oxyphenbutazone^{1,3} are well known for their adverse effects on the blood and especially for fatal agranulocytosis and aplastic anaemia. Leucopenia, pancytopenia, haemolytic anaemia, and thrombocytopenia may also occur. The UK CSM⁴ noted that between July 1963 and January 1993 it had received 74 reports of agranulocytosis (39 fatal) associated with phenylbutazone and 40 reports of neutropenia (4 fatal). Up-to-date figures were not provided on oxyphenbutazone, but it is considered to be more toxic to the bone marrow than phenylbutazone.¹

1. Anonymous. Phenylbutazone and oxyphenbutazone: time to call a halt. *Drug Ther Bull* 1984; **22**: 5–6.
2. Böttiger LE, Westerholm B. Drug-induced blood dyscrasias in Sweden. *BMJ* 1973; **3**: 339–43.
3. The International Agranulocytosis and Aplastic Anemia Study. Risks of agranulocytosis and aplastic anemia: a first report of their relation to drug use with special reference to analgesics. *JAMA* 1986; **256**: 1749–57.
4. CSM/MCA. Drug-induced neutropenia and agranulocytosis. *Current Problems* 1993; **19**: 10–11. Also available at: http://www.mhra.gov.uk/home/idcplg?1dcService=GET_FILE&DocName=CON2024456&RevisionSelectionMethod=LatestReleased (accessed 27/04/07)

Porphyria. Phenylbutazone has been associated with acute attacks of porphyria and is considered unsafe in porphyric patients.

Preparations

Proprietary Preparations (details are given in Part 3)

Belg.: Butazolodin; **Braz.:** Butazolodina; Butazolon†; Butazona; Butazonil†; Neo Butazol; Peralgin†; **Fr.:** Butazolodine; **Ger.:** Ambene; exrheudon OPT; **Indon.:** Akrofen; Berlizon; Irgapan; **Ital.:** Kadol; **Mex.:** Astrofen; Bloken; Bresal; Butalen; Butazolodina; Delbulasa†; Fezona†; Lorfenil†; Meprosona-F;

Rudesol†; **Neth.:** Butazolodin; **Pol.:** Butapirazol; **Port.:** Basireuma†; **Rus.:** Butadion (Бутадийон); **S.Afr.:** Inflazone; **Spain:** Butazolodina; **Switz.:** Butadion; **Thai.:** Buta†; Neo-Pyrazol; **Venez.:** Promifen†; Ticinil.

Multi-ingredient: **Austria:** Ambene; Ambene N; **Braz.:** Butazolil; Dorend†; Mioflex; Reumat†; Reumix†; **Chile:** Balsamo Analgesico con Fenilbutazona; **Fr.:** Dextrarine Phenylbutazone; **Ger.:** Ambene Comp†; **Hung.:** Rheosolon; **Indon.:** Butamidon; Cetapyrin; Enkapyrin; New Skelan; **Mex.:** Butayonacol; Butisel; Dexadutil; Dibutazona; Vengescic†; Zolidime†; **Rus.:** Ambene (Амбене); **Spain:** Artrodemesol Extra; Doctofril Antiinflammat; **Switz.:** Butaparin; Hepabuzone; **Thai.:** Alaxan; Asialax; Buta Pee Dee†; Butanion; Mylophen; Trabit†.

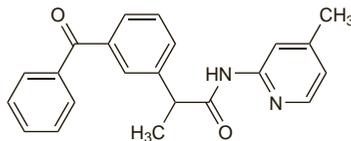
Piketoprofen (rINN)

Pikétoprofène; Piketoprofeno; Piketoprofenum. *m*-Benzoyl-*N*-(4-methyl-2-pyridyl)hydratropamide.

Пикетопрофен

$C_{22}H_{20}N_2O_2 = 344.4$.

CAS — 60576-13-8.

**Profile**

Piketoprofen is an NSAID (p.96) that has been used topically as the hydrochloride in concentrations of about 2% in musculoskeletal, joint, peri-articular, and soft-tissue disorders.

Preparations

Proprietary Preparations (details are given in Part 3)

Port.: Picalm; Zemalex; **Spain:** Calmatel; Triparsaan.

Piritramide (BAN, rINN)

Piriniramide; Piritramid; Piritramida; Piritramidi; Piritramidum; R-3365. 1-(3-Cyano-3,3-diphenylpropyl)-4-piperidinopiperidine-4-carboxamide.

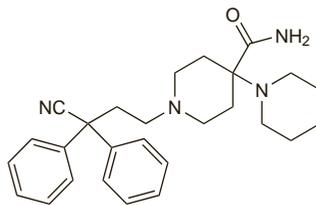
Пиритрамида

$C_{27}H_{34}N_4O = 430.6$.

CAS — 302-41-0.

ATC — N02AC03.

ATC Vet — QN02AC03.

**Profile**

Piritramide is an opioid analgesic (p.101).

It is used for the management of severe pain including postoperative pain, for premedication, and to provide analgesia during anaesthesia. It is given by intramuscular, subcutaneous, or slow intravenous injection as the tartrate in doses equivalent of up to about 30 mg of the base.

Reviews.

1. Kumar N, Rowbotham DJ. Piritramide. *Br J Anaesth* 1999; **82**: 3–5.

Porphyria. Piritramide is considered to be unsafe in patients with porphyria because it has been shown to be porphyrinogenic in *animals* or *in-vitro* systems.

Preparations

Proprietary Preparations (details are given in Part 3)

Austria: Dipidol; **Belg.:** Dipidolor; **Cz.:** Dipidolor; **Ger.:** Dipidolor; **Neth.:** Dipidolor.

Piroxicam (BAN, USAN, rINN)

CP-16171; Piroksikaami; Piroksikam; Piroksikamas; Piroxicamum; Piroxikám; Piroxikam. 4-Hydroxy-2-methyl-*N*-(2-pyridyl)-2*H*-1,2-benzothiazine-3-carboxamide 1,1-dioxide.

Пироксикам

$C_{15}H_{13}N_3O_4S = 331.3$.

CAS — 36322-90-4.

ATC — M01AC01; M02AA07; S01BC06.

ATC Vet — QM01AC01; QM02AA07; QS01BC06.



Pharmacopoeias. In *Chin.*, *Eur.* (see p.vii), *Jpn.*, *US*, and *Viet.*

Ph. Eur. 6.2 (Piroxicam). A white or slightly yellow, crystalline powder. It shows polymorphism. Practically insoluble in water; slightly soluble in dehydrated alcohol; soluble in dichloromethane. Store in airtight containers. Protect from light.

USP 31 (Piroxicam). An off-white to light tan or light yellow, odourless powder. It forms a monohydrate that is yellow. Very slightly soluble in water, in dilute acids, and in most organic solvents; slightly soluble in alcohol and in aqueous alkaline solutions. Store in airtight containers. Protect from light.

Piroxicam Betadex (USAN, rINNM)

CHF-1194; Piroxicam Beta Cyclodextrin; Piroxicam Beta Cyclodextrin Complex; Piroxicam Betadex; Piroxicamum Betadexum.

Пироксикам Бетадекс

$(C_{15}H_{13}N_3O_4S)_2 \cdot (C_{42}H_{70}O_{35})_5 = 6337.6$.

CAS — 96684-40-1.

Adverse Effects and Treatment

As for NSAIDs in general, p.96.

Local irritation and occasionally bleeding may occur with piroxicam suppositories and there may be pain and occasionally tissue damage at the injection site on intramuscular use. Application site reactions have also occurred with topical preparations of piroxicam.

Piroxicam is considered to be associated with an intermediate risk of gastrointestinal effects although there is some suggestion that the risk may be higher than for other intermediate-risk NSAIDs (p.97).

◇ A report¹ of the adverse reactions associated with piroxicam in South Africa during 1981–86 included two reactions, paraesthesia and hair loss, not previously recorded in the literature.

1. Gerber D. Adverse reactions of piroxicam. *Drug Intell Clin Pharm* 1987; **21**: 707–10.

Effects on the blood. Decreases in haemoglobin and haematocrit not associated with obvious gastrointestinal bleeding, have occurred in patients taking piroxicam. Thrombocytopenia, thrombocytopenic purpura,¹ and aplastic anaemia² have been described in patients on piroxicam.

1. Bjørnstad H, Vik Ø. Thrombocytopenic purpura associated with piroxicam. *Br J Clin Pract* 1986; **40**: 42.
2. Lee SH, et al. Aplastic anaemia associated with piroxicam. *Lancet* 1982; **i**: 1186.

Effects on electrolytes. Reversible hyperkalaemic hyperchloraemic acidosis has been reported^{1,2} in patients receiving piroxicam. Severe hyponatraemia and symptoms resembling the syndrome of inappropriate antidiuretic hormone secretion have also been associated with piroxicam.³

See also Effects on the Kidneys, below.

1. Grossman LA, Moss S. Piroxicam and hyperkalaemic acidosis. *Ann Intern Med* 1983; **99**: 282.
2. Miller KP, et al. Severe hyperkalemia during piroxicam therapy. *Arch Intern Med* 1984; **144**: 2414–15.
3. Petersson I, et al. Water intoxication associated with non-steroidal anti-inflammatory drug therapy. *Acta Med Scand* 1987; **221**: 221–3.

Effects on the kidneys. Acute nephropathy with characteristic features of Henoch-Schönlein purpura,¹ acute renal failure,² uraemia with hyperkalaemia, and acute interstitial nephritis³ have been associated with systemic use of piroxicam. Nephrotic syndrome and interstitial nephritis have followed topical use of piroxicam gel.⁴

1. Goebel KM, Mueller-Brodmann W. Reversible overt nephropathy with Henoch-Schönlein purpura due to piroxicam. *BMJ* 1982; **284**: 311–12.
2. Fraiss MA, et al. Piroxicam-induced renal failure and hyperkalaemia. *Ann Intern Med* 1983; **99**: 129–30.
3. Mitnick PD, Klein WJ. Piroxicam-induced renal disease. *Arch Intern Med* 1984; **144**: 63–4.
4. O'Callaghan CA, et al. Renal disease and use of topical non-steroidal anti-inflammatory drugs. *BMJ* 1994; **308**: 110–11.

The symbol † denotes a preparation no longer actively marketed