described on p.1492. For recommendations concerning the correct use of corticosteroids on the skin, see p.1497.

Preparations

Proprietary Preparations (details are given in Part 3)
Cz.: Depersolon†; ***Hung.:*** Depersolon†.

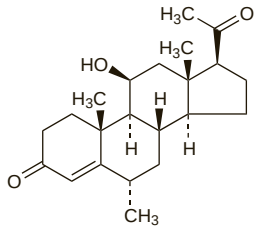
Multi-ingredient: ***Cz.:*** Mycosolon†; ***Hung.:*** Mycosolon; ***Pol.:*** Mycosolon; ***Rus.:*** Mycosolon (Микозолон).

Medrysone *(USAN, pINN)* ⊗

11β-Hydroxy-6α-methylprogesterone; Medrisona; Médrysone; Medrysonum; NSC-63278; U-8471. 11β-Hydroxy-6α-methylpregn-4-ene-3,20-dione.

Медризон

$C_{22}H_{32}O_3$ = 344.5.
CAS — 2668-66-8.
ATC — S01BA08.
ATC Vet — QS01BA08.



Profile

Medrysone is a corticosteroid used for its glucocorticoid activity (see p.1490) in the topical treatment of allergic and inflammatory conditions of the eye. It is usually given as 1% eye drops.

Prolonged use of ophthalmic preparations containing corticosteroids has caused raised intra-ocular pressure and reduced visual function.

Preparations

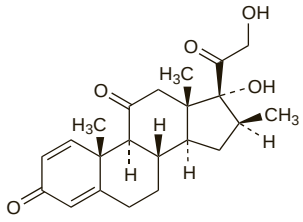
Proprietary Preparations (details are given in Part 3)
Austral.: HMS†; ***Port.:*** Medrisocil†; ***USA:*** HMS†.

Meprednisone *(USAN, rINN)* ⊗

Meprednisona; Méprednisone; Meprednisonum; 16β-Methylprednisone; NSC-527579; Sch-4358. 17α,21-Dihydroxy-16β-methylpregna-1,4-diene-3,11,20-trione.

Мепреднизон

$C_{22}H_{28}O_5$ = 372.5.
CAS — 1247-42-3.
ATC — H02AB15.
ATC Vet — QH02AB15.



Pharmacopoeias. In *US.*
USP 31 (Meprednisone). Store in airtight containers at a temperature not exceeding 40°. Protect from light.

Profile

Meprednisone is a corticosteroid with mainly glucocorticoid activity (p.1490). It has been given orally as either the free alcohol or the acetate and by injection as the sodium hemisuccinate.

Preparations

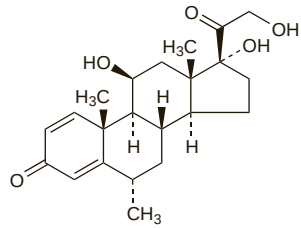
Proprietary Preparations (details are given in Part 3)
Arg.: Cortipyren B; Deltisona B; Latisona B; Prednisonal; Prenolone; Rupesona B; ***Mex.:*** Lectan.

Methylprednisolone *(BAN, rINN)* ⊗

Meilprednizolon; Methylprednisolon; Méthylprednisolone; 6α-Methylprednisolone; Methylprednisolonum; Metilprednisolona; Metilprednizolon; Metilprednizolonas; Metylprednisolon; Metyyliprednisoloni; NSC-19987. 11β,17α,21-Trihydroxy-6α-methylpregna-1,4-diene-3,20-dione.

Метилпреднизолон

$C_{22}H_{30}O_5$ = 374.5.
CAS — 83-43-2.
ATC — D07AA01; H02AB04.
ATC Vet — QD07AA01; QD10AA02; QH02AB04.



Pharmacopoeias. In *Eur.* (see p.vii), *Jpn*, and *US.*
Ph. Eur. 6.2 (Methylprednisolone). A white or almost white, crystalline powder. It shows polymorphism. Practically insoluble in water; sparingly soluble in alcohol; slightly soluble in acetone and in dichloromethane. Protect from light.
USP 31 (Methylprednisolone). A white to practically white, odourless, crystalline powder. Practically insoluble in water; soluble 1 in 100 of alcohol, and in 1 in 800 of chloroform and of ether; slightly soluble in acetone; sparingly soluble in dioxan and in methyl alcohol. Store in airtight containers. Protect from light.

Methylprednisolone Acetate *(BANM, rINNM)* ⊗

Acetato de metilprednisolona; Methylprednisolon-acetát; Méthylprednisolone, acétate de; Methylprednisoloni acetas; Metilprednizolon Asetat; Metilprednizolon-acetát; Metilprednizolono acetatas; Metylprednisolonacetat; Metyyliprednisoloniasetaatti. Methylprednisolone 21-acetate.

Метилпреднизолона Ацетат

$C_{24}H_{32}O_6$ = 416.5.
CAS — 53-36-1.
ATC — D07AA01; H02AB04.
ATC Vet — QD07AA01; QH02AB04.

Pharmacopoeias. In *Eur.* (see p.vii) and *US.*
Ph. Eur. 6.2 (Methylprednisolone Acetate). A white or almost white, crystalline powder. Practically insoluble in water; sparingly soluble in alcohol and in acetone. Protect from light.
USP 31 (Methylprednisolone Acetate). A white or practically white, odourless, crystalline powder. Soluble 1 in 1500 of water, 1 in 400 of alcohol, 1 in 250 of chloroform, and 1 in 1500 of ether; sparingly soluble in acetone and in methyl alcohol; soluble in dioxan. Store in airtight containers at a temperature of 25°, excursions permitted between 15° and 30°. Protect from light.

Methylprednisolone Hydrogen Succinate *(BANM, rINNM)* ⊗

Hidrogenosuccinato de metilprednisolona; Methylprednisolone Hemisuccinate; Méthylprednisolone, Hémisuccinate de; Méthylprednisolone, Hydrogénosuccinate de; Methylprednisolon-hydrogen-sukcinát; Methylprednisoloni Hemisuccinas; Methylprednisoloni hydrogenosuccinas; Metilprednizolon-hidrogén-szukcinát; Metilprednizolono-vandenilio sukcinatas; Metylprednisolonvätesuccinat; Metyyliprednisolonivetysuksinaatti. Methylprednisolone 21-(hydrogen succinate).

Метилпреднизолона Гемисукцинат

$C_{26}H_{34}O_8$ = 474.5.
CAS — 2921-57-5.
ATC — D07AA01; H02AB04.
ATC Vet — QD07AA01; QH02AB04.

Pharmacopoeias. In *Eur.* (see p.vii), *Jpn*, and *US.*
Ph. Eur. 6.2 (Methylprednisolone Hydrogen Succinate). A white or almost white, hygroscopic powder. Practically insoluble in water; slightly soluble in dehydrated alcohol and in acetone; dissolves in dilute solutions of alkali hydroxides. Store in airtight containers. Protect from light.
USP 31 (Methylprednisolone Hemisuccinate). A white or nearly white, odourless or nearly odourless, hygroscopic solid. Very slightly soluble in water; freely soluble in alcohol; soluble in acetone. Store in airtight containers.

Methylprednisolone Sodium Succinate *(BANM, rINNM)* ⊗

Methylprednisolone Sodium Hemisuccinate; Méthylprednisolone, Succinate Sodique de; Methylprednisoloni Natrii Succinas; Metilprednizolon Sodyum Süksinat; Succinato sódico de metilprednisolona. Methylprednisolone 21-(sodium succinate).

Метилпреднизолона Натрия Сукцинат

$C_{26}H_{33}NaO_8$ = 496.5.
CAS — 2375-03-3.
ATC — D07AA01; H02AB04.
ATC Vet — QD07AA01; QH02AB04.

Pharmacopoeias. In *US.*
USP 31 (Methylprednisolone Sodium Succinate). A white or nearly white, odourless, hygroscopic, amorphous solid. Soluble 1 in 1.5 of water and 1 in 12 of alcohol; very slightly soluble in acetone; insoluble in chloroform and in ether. Store in airtight containers. Protect from light.

Stability. Methylprednisolone sodium succinate injection (*Solu-Medrol, USA*) was considered to be stable for 7 days when diluted in water for injection and stored in glass vials at 4°. When stored under similar conditions at 22°, it was considered to be stable for 24 hours.[1] The manufacturers state that the prepared solution should be stored at 20 to 25° and used within 48 hours of mixing.

1. Nahata MC, *et al.* Stability of diluted methylprednisolone sodium succinate injection at two temperatures. *Am J Hosp Pharm* 1994; **51:** 2157–9.

Adverse Effects, Treatment, Withdrawal, and Precautions

As for corticosteroids in general (see p.1490). Rapid intravenous injection of large doses has been associated with cardiovascular collapse.

Methylprednisolone may be slightly less likely than prednisolone to cause sodium and water retention.

When applied topically, particularly to large areas, when the skin is broken, or under occlusive dressings, corticosteroids may be absorbed in sufficient amounts to cause systemic effects.

◊ References to various adverse effects associated with intravenous methylprednisolone in high-dose pulse therapy[1-11] and to adverse effects after intra-articular[12,13] and intranasal injection.[14] Epidural dosage (or more particularly inadvertent intrathecal dosage during attempted epidural placement) may be associated with serious adverse effects including arachnoiditis and aseptic meningitis, although the degree of risk is uncertain.[15]

1. Newmark KJ, *et al.* Acute arthralgia following high-dose intravenous methylprednisolone therapy. *Lancet* 1974; **ii:** 229.
2. Bailey RR, Armour P. Acute arthralgia after high-dose intravenous methylprednisolone. *Lancet* 1974; **ii:** 1014.
3. Bennett WM, Strong D. Arthralgia after high-dose steroids. *Lancet* 1975; **i:** 332.
4. Moses RE, *et al.* Fatal arrhythmia after pulse methylprednisolone therapy. *Ann Intern Med* 1981; **95:** 781–2.
5. Oto A, *et al.* Methylprednisolone pulse therapy and peritonitis. *Ann Intern Med* 1983; **99:** 282.
6. Suchman AL, *et al.* Seizure after pulse therapy with methyl prednisolone. *Arthritis Rheum* 1983; **26:** 117.
7. Ayoub WT, *et al.* Central nervous system manifestations after pulse therapy for systemic lupus erythematosus. *Arthritis Rheum* 1983; **26:** 809–10.
8. Williams AJ, *et al.* Disseminated aspergillosis in high dose steroid therapy. *Lancet* 1983; **i:** 1222.
9. Barrett DF. Pulse methylprednisolone therapy. *Lancet* 1983; **ii:** 800.
10. Baethge BA, Lidsky MD. Intractable hiccups associated with high-dose intravenous methylprednisolone therapy. *Ann Intern Med* 1986; **104:** 58–9.
11. Gardiner PVG, Griffiths ID. Sudden death after treatment with pulsed methylprednisolone. *BMJ* 1990; **300:** 125.
12. Black DM, Filak AT. Hyperglycemia with non-insulin-dependent diabetes following intraarticular steroid injection. *J Fam Pract* 1989; **28:** 462–3.
13. Pollock B, *et al.* Chronic urticaria associated with intra-articular methylprednisolone. *Br J Dermatol* 2001; **144:** 1228–30.
14. Johns KJ, Chandra SR. Visual loss following intranasal corticosteroid injection. *JAMA* 1989; **261:** 2413.
15. Rodgers PT, Connelly JF. Epidural administration of methylprednisolone for back pain. *Am J Hosp Pharm* 1994; **51:** 2789–90.

Interactions

The interactions of corticosteroids in general are described on p.1494.

Pharmacokinetics

For a brief outline of the pharmacokinetics of corticosteroids, see p.1495.

Methylprednisolone is fairly rapidly distributed after oral doses, with a plasma half-life of 3.5 hours or more. The tissue half-life is reported to range from 18 to 36 hours.

Methylprednisolone acetate is absorbed from joints over a week but is more slowly absorbed following deep intramuscular injection. The sodium succinate ester is rapidly absorbed after intramuscular doses, with peak plasma concentrations obtained in 2 hours.

Methylprednisolone crosses the placenta.

◊ References.

1. Tornatore KM, *et al.* Repeated assessment of methylprednisolone pharmacokinetics during chronic immunosuppression in renal transplant recipients. *Ann Pharmacother* 1995; **29:** 120–4.
2. Rohatagi S, *et al.* Pharmacokinetics of methylprednisolone and prednisolone after single and multiple oral administration. *J Clin Pharmacol* 1997; **37:** 916–25.
3. Tornatore KM, *et al.* Pharmacokinetics and pharmacodynamic response of methylprednisolone in premenopausal renal transplant recipients. *J Clin Pharmacol* 2004; **44:** 1003–11.

Uses and Administration

Methylprednisolone is a corticosteroid with mainly glucocorticoid activity (p.1490); 4 mg of methylprednisolone is equivalent in anti-inflammatory activity to about 5 mg of prednisolone.

It is used, either in the form of the free alcohol or in one of the esterified forms, in the treatment of conditions for which corticosteroid therapy is indicated (see p.1495) except adrenocortical-deficiency states, for which hydrocortisone with supplementary fludrocortisone is preferred.

The dose is usually expressed in terms of the base, and the following are each equivalent to about 40 mg of methylprednisolone:

- methylprednisolone acetate 44 mg
- methylprednisolone hydrogen succinate 51 mg
- methylprednisolone sodium succinate 53 mg

When given **orally**, methylprednisolone usually has an initial dosage range of 4 to 48 mg daily but higher initial doses of up to 100 mg or more daily may be used in acute severe disease.

For **parenteral use** in **intensive** or **emergency therapy**, methylprednisolone sodium succinate may be given by intramuscular or intravenous injection or by intravenous infusion. The intravenous route is preferred for its more rapid effect in emergency therapy. The usual initial intramuscular or intravenous dose ranges from the equivalent of 10 to 500 mg of methylprednisolone daily. Large intravenous doses (over 250 mg) should normally be given slowly over at least 30 minutes; doses up to 250 mg should be given over at least 5 minutes. High doses should generally not be given for prolonged periods; emergency treatment should only be used until the patient is stabilised. High doses given intermittently for a limited period have sometimes been known as 'pulse therapy' (see Administration, below) and in graft rejection (see Organ and Tissue Transplantation, p.1810) up to 1 g has been given daily for up to 3 days. In intensive therapy of acute spinal cord injury (p.1513) initial doses of the equivalent of up to 30 mg/kg of methylprednisolone have been given by bolus intravenous injection over 15 minutes and followed, after a 45-minute pause, by intravenous infusion of 5.4 mg/kg per hour over 24 hours or longer. For slow intravenous infusion methylprednisolone sodium succinate is dissolved in an appropriate volume of glucose 5% or sodium chloride 0.9% or sodium chloride 0.9% and glucose 5%.

Parenteral doses in children have varied considerably, depending on the condition: a range of 1 to 30 mg/kg of methylprednisolone daily has been given by the intravenous or intramuscular routes. A total dose of 1 g daily should not normally be exceeded.

Methylprednisolone acetate may be given by intramuscular injection for a prolonged systemic effect, the dose varying from 40 mg every 2 weeks to 120 mg weekly.

For **intra-articular injection** and for **injection into soft tissues** methylprednisolone acetate as an aqueous suspension is used. The dose by intra-articular injection varies from 4 to 80 mg according to the size of the affected joint. The acetate may also be given by intralesional injection in doses of 20 to 60 mg.

For use in the treatment of various skin disorders methylprednisolone acetate may be applied **topically**, usually in concentrations of 0.25%. The aceponate, which may exhibit modified topical activity, has also been applied as a 0.1% cream, lotion, or ointment. For recommendations concerning the correct use of corticosteroids on the skin, and a rough guide to the clinical potencies of topical corticosteroids, see p.1497.

Other esters of methylprednisolone that have occasionally been used include the cipionate and the suleptanate.

◊ General references.

1. Cronstein BN. Clinical use of methylprednisolone sodium succinate: a review. *Curr Ther Res* 1995; **56:** 1–15.

Administration. For short-term intensive corticosteroid therapy or in certain emergency situations a technique known as 'pulse therapy' has been used. Methylprednisolone has often been used in this manner. Typically, high doses of about 1 g intravenously have been given, daily or on alternate days or weekly, for a limited number of doses; the most common regimen appears to be 1 g daily for 3 days.

Blood disorders. Methylprednisolone is one of the corticosteroids that have been used in the management of haemangioma (p.1505) and the Kasabach-Merritt syndrome.[1] There are also reports of benefit from very high-dose therapy in a few patients with refractory primary acquired pure red cell aplasia,[2] or aplasia due to Blackfan-Diamond anaemia.[3]

1. Özsoylu Ş, *et al.* Megadose methylprednisolone therapy for Kasabach-Merritt syndrome. *J Pediatr* 1996; **129:** 947.
2. Kadikoylu G, *et al.* High-dose methylprednisolone therapy in pure red cell aplasia. *Ann Pharmacother* 2002; **36:** 55–8.
3. Bernini JC, *et al.* High-dose intravenous methylprednisolone therapy for patients with Diamond-Blackfan anemia refractory to conventional doses of prednisone. *J Pediatr* 1995; **127:** 654–9.

IDIOPATHIC THROMBOCYTOPENIC PURPURA. High-dose intravenous methylprednisolone may be used as part of the emergency management of acute idiopathic thrombocytopenic purpura (p.1505), for example when major acute bleeding or intracranial haemorrhage supervene. There is some evidence that methylprednisolone is less effective than normal immunoglobulins. Methylprednisolone has also been used by mouth or intravenously in the management of the chronic form, although prednisolone or prednisone are more frequently used for oral therapy and good controlled trials are scanty.

References.

1. von dem Borne AEGKR, *et al.* High dose intravenous methylprednisolone or high dose intravenous gammaglobulin for autoimmune thrombocytopenia. *BMJ* 1988; **296:** 249–50.
2. Özsoylu S, *et al.* Megadose methylprednisolone for chronic idiopathic thrombocytopenic purpura. *Lancet* 1990; **336:** 1078–9.
3. Akoğlu T, *et al.* Megadose methylprednisolone pulse therapy in adult idiopathic thrombocytopenic purpura. *Lancet* 1991; **337:** 56.
4. Özsoylu S. Mega-dose methylprednisolone for chronic idiopathic thrombocytopenic purpura. *Lancet* 1991; **337:** 1611–12.
5. Rosthøj S, *et al.* Randomized trial comparing intravenous immunoglobulin with methylprednisolone pulse therapy in acute idiopathic thrombocytopenic purpura. *Acta Paediatr* 1996; **85:** 910–15.
6. Alpdoğan Ö, *et al.* Efficacy of high-dose methylprednisolone as a first-line therapy in adult patients with idiopathic thrombocytopenic purpura. *Br J Haematol* 1998; **103:** 1061–3.
7. Godeau B, *et al.* Intravenous immunoglobulin or high-dose methylprednisolone, with or without oral prednisone, for adults with untreated severe autoimmune thrombocytopenic purpura: a randomised, multicentre trial. *Lancet* 2002; **359:** 23–9.

Rheumatoid arthritis. Methylprednisolone given in intravenous pulses has been reported[1-7] to be effective in the treatment of rheumatoid arthritis (p.11) including juvenile idiopathic arthritis. Some studies have shown this treatment to be of greatest benefit when given with a disease-modifying antirheumatic drug (DMARD),[1,2,4] although others showed the addition of methylprednisolone to existing therapy to have no extra benefit.[6] A comparatively low dose of 100 mg was found to be as effective as 1000 mg in one study.[3] Monthly doses of methylprednisolone by deep intramuscular injection were also an effective adjunct to gold therapy.[8]

A preliminary study in children has found intravenous pulses of methylprednisolone 30 mg/kg to be effective treatment for systemic flares of juvenile idiopathic arthritis.[7]

1. Walters HT, Cawley MID. Combined suppressive drug treatment in severe refractory rheumatoid disease: an analysis of the relative effects of parenteral methylprednisolone, cyclophosphamide and sodium aurothiomalate. *Ann Rheum Dis* 1988; **47:** 924–9.
2. Smith MD, *et al.* The clinical and immunological effects of pulse methylprednisolone therapy in rheumatoid arthritis I: clinical effects. *J Rheumatol* 1988; **15:** 229–32.
3. Igelhart IW, *et al.* Intravenous pulsed steroids in rheumatoid arthritis: a comparative dose study. *J Rheumatol* 1990; **17:** 159–62.
4. Smith MD, *et al.* Pulse methylprednisolone therapy in rheumatoid arthritis: unproved therapy, unjustified therapy, or effective adjunctive treatment? *Ann Rheum Dis* 1990; **49:** 265–7.
5. Kapisinszky N, Keszthelyi B. High dose intravenous methylprednisolone pulse therapy in patients with rheumatoid arthritis. *Ann Rheum Dis* 1990; **49:** 567–8.
6. Hansen TM, *et al.* Double blind placebo controlled trial of pulse treatment with methylprednisolone combined with disease modifying drugs in rheumatoid arthritis. *BMJ* 1990; **301:** 268–70.
7. Adebajo AO, Hall MA. The use of intravenous pulsed methylprednisolone in the treatment of systemic-onset juvenile chronic arthritis. *Br J Rheumatol* 1998; **37:** 1240–2.
8. Corkill MM, *et al.* Intramuscular depot methylprednisolone induction of chrysotherapy in rheumatoid arthritis: a 24-week randomized controlled trial. *Br J Rheumatol* 1990; **29:** 274–9.

Systemic lupus erythematosus. Methylprednisolone has been widely used to treat disease flares or severe manifestations of SLE (p.1513).

References.

1. Badsha H, Edwards CJ. Intravenous pulses of methylprednisolone for systemic lupus erythematosus. *Semin Arthritis Rheum* 2003; **32:** 370–7.
2. Danowski A, *et al.* Flares in lupus: Outcome Assessment Trial (FLOAT), a comparison between oral methylprednisolone and intramuscular triamcinolone. *J Rheumatol* 2006; **33:** 57–60.
3. Trevisani VF, *et al.* Cyclophosphamide versus methylprednisolone for treating neuropsychiatric involvement in systemic lupus erythematosus. Available in The Cochrane Database of Systematic Reviews; Issue 2. Chichester: John Wiley; 2006 (accessed 20/06/06).

Preparations

BP 2008: Methylprednisolone Acetate Injection; Methylprednisolone Tablets;
USP 31: Methylprednisolone Acetate Cream; Methylprednisolone Acetate Injectable Suspension; Methylprednisolone Sodium Succinate for Injection; Methylprednisolone Tablets; Neomycin Sulfate and Methylprednisolone Acetate Cream.

Proprietary Preparations (details are given in Part 3)
Arg.: Advantan; Cipridanol; Corticel†; Cortisolona†; Solu-Medrol; ***Austral.:*** Advantan; Depo-Medrol; Depo-Nisolone; Medrol†; Solu-Medrol; ***Austria:*** Advantan; Depo-Medrol; Solu-Medrol; Urbason; ***Belg.:*** Advantan; Depo-Medrol; Medrol; Solu-Medrol; ***Braz.:*** Advantan; Alergolon; Depo-Medrol; Predmetil; Solu-Medrol; Solu-Pred†; Solupren; Unimedrol; ***Canad.:*** Depo-Medrol; Medrol; Solu-Medrol; ***Chile:*** Depo-Medrol; Medrol; Solu-Medrol; ***Cz.:*** Advantan; Depo-Medrol; Medrol; Metypred†; Solu-Medrol; Urbason†; ***Denm.:*** Depo-Medrol; Medrol; Solu-Medrol; ***Fin.:*** Advantan; Depo-Medrol; Medrol; Solomet; Solu-Medrol; ***Fr.:*** Depo-Medrol; Medrol; Solu-Medrol; ***Ger.:*** Advantan; Depo-Medrate†; M-PredniHexal; Medrate; Metypred; Metysolon; Predni M; Urbason; ***Gr.:*** Advantan; Depo-Medrol; Depo-Medrone†; Lyo-drol†; Medrol; Solu-Medrol; ***Hong Kong:*** Advantan; Depo-Medrol; Medrol; Solu-Medrol; ***Hung.:*** Depo-Medrol; Medrol; Metypred; Solu-Medrol; ***India:*** Depo-Medrol; Solu-Medrol; Unidrol†; ***Indon.:*** Advantan; Depo-Medrol; Flason; Hexilon; Intidrol; Lameson; Lexcomet; Medixon; Medrol; Meprilon; Meproson; Mesol; Methylon; Metidrol; Metisol; Nichomedson; Prednicort; Prednox; Pretilon; Sanexon; Solu-Medrol; Somerol; Sonicor; Stenirol; Thimelon; Tison; Tropidrol; Urbason; Yalone; ***Irl.:*** Depo-Medrone; Solu-Medrone; ***Israel:*** A-Methapred†; Depo-Medrol; Medrol; Solu-Medrol; Vanderm†; ***Ital.:*** Advantan; Asmacortone; Avancort; Depo-Medrol; Esametone†; Medrol; Metilbetasone Solubile; Solu-Medrol; Supresol; Urbason; ***Malaysia:*** Depo-Medrol; Solu-Medrol; ***Mex.:*** Advantan; Cryosolona; Depo-Medrol; Metisona; Prednilem; Radilem; Solipred; Solu-Medrol; ***Neth.:*** Depo-Medrol; Metypresol†; Solu-Medrol; ***Norw.:*** Depo-Medrol; Medrol; Solu-Medrol; ***NZ:*** Advantan; Depo-Medrol; Medrol; Solu-Medrol; ***Philipp.:*** Adrena; Advantan; Depo-Medrol; Medixon; Medrol; Solu-Medrol; ***Pol.:*** Advantan; Depo-Medrol; Medrol; Metypred; Solu-Medrol; ***Port.:*** Advantan; Depo-Medrol; Medrol; Metilpren; Solu-Medrol; ***Rus.:*** Advantan (Адвантан); Depo-Medrol (Депо-медрол)†; Medrol (Медрол); Metypred (Метипред); Solu-Medrol (Солу-медрол); ***S.Afr.:*** Advantan; Depo-Medrol; Medrol; Metypresol; Solu-Medrol; ***Singapore:*** Solu-Medrol; ***Spain:*** Adventan; Depo Moderin†; Lexxema; Solu-Moderin; Urbason; ***Swed.:*** Depo-Medrol; Medrol; Solu-Medrol; ***Switz.:*** Advantan; Depo-Medrol; Medrol; Solu-Medrol; ***Thai.:*** Depo-Medrol; Solu-Medrol; ***Turk.:*** Advantan; Depo-Medrol; Prednol; ***UK:*** Depo-Medrone; Medrone; Solu-Medrone; ***USA:*** A-Methapred; depMedalone; Depo-Medrol; Depopred†; Medrol; Solu-Medrol; ***Venez.:*** Advantan; Depo-Medrol; Medrol; Prednicort; Solu-Medrol.

Multi-ingredient: ***Austral.:*** Neo-Medrol; ***Austria:*** Depo-Medrol mit Lidocain; ***Belg.:*** Depo-Medrol + Lidocaine; ***Canad.:*** Depo-Medrol with Lidocaine; Medrol Acne Lotion; Neo-Medrol Acne; Neo-Medrol Veriderm†; ***Fin.:*** Depo-Medrol cum Lidocain; Neo-Medrol comp†; Solomet c bupivacain hydrochlorid; ***Hong Kong:*** Depo-Medrol with Lidocaine; Neo-Medrol Acne; ***Irl.:*** Depo-Medrone with Lidocaine; ***Israel:*** Depo-Medrol with Lidocaine; Neo-Medrol; ***Ital.:*** Depo-Medrol + Lidocaina; Medrol Lozione Antiacne†; Neo-Medrol Veriderm†; ***Malaysia:*** Neo-Medrol; ***Neth.:*** Depo-Medrol + Lidocaine; ***Norw.:*** Depo-Medrol cum Lidocain; ***NZ:*** Depo-Medrol with Lidocaine; ***Pol.:*** Depo-Medrol z Lidokaina; ***Port.:*** Depo-Medrol com Lidocaina; ***S.Afr.:*** Depo-Medrol with Lidocaine; Neo-Medrol; ***Singapore:*** Neo-Medrol; ***Spain:*** Moderin Acne†; ***Swed.:*** Depo-Medrol cum Lidocain; ***Switz.:*** Depo-Medrol Lidocaine; ***Thai.:*** Depo-Medrol with Lidocaine†; Neo-Medrol; ***UK:*** Depo-Medrone with Lidocaine.

Mometasone Furoate *(BANM, USAN, rINNM)* ⊗

Furoato de mometasona; Mométasone, furoate de; Mometasonfuroat; Mometason-furoát; Mometasoni furoas; Mometasonifuroaatti; Mometazon Furoat; Mometazon-furoát; Mometazono furoatas; Mometazonu furoinian; Sch-32088. 9α,21-Dichloro-11β,17-dihydroxy-16α-methylpregna-1,4-diene-3,20-dione 17-(2-furoate).

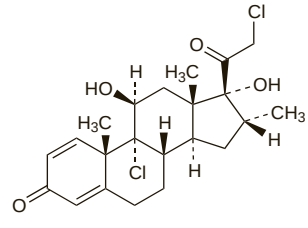
Мометазона Фуроат

$C_{27}H_{30}Cl_2O_6$ = 521.4.

CAS — 105102-22-5 (mometasone); 83919-23-7 (mometasone furoate).

ATC — D07AC13; R01AD09; R03BA07.

ATC Vet — QD07AC13; QR01AD09; QR03BA07.



(mometasone)

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

Ph. Eur. 6.2 (Mometasone Furoate). A white or almost white powder. Practically insoluble in water; slightly soluble in alcohol; soluble in acetone and in dichloromethane.

USP 31 (Mometasone Furoate). A white to off-white powder. Soluble in acetone and in dichloromethane.