Heparin-Induced Priapism

The authors of a case report of heparin-induced priapism, published in the December issue, state that “the treatment of priapism remains largely surgical, but diphenhydramine, trazodone, cyproheptadine, and benztropine have been used with various degrees of success.”

In fact, trazodone is not used as a treatment of priapism, but rather is known to induce priapism. I believe that the authors have misquoted the reference cited for this information, which states that “diphenhydramine has been employed successfully in priapism secondary to antipsychotics (eg, trazodone and chlorpromazine), and α-adrenergic blockers, and cyproheptadine and benztropine have also been shown to be useful in priapism secondary to trazodone.”

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References

Reply:

We have reviewed the reference, and Ms Singh is correct. It appears that during the development of the paper an error was introduced into the statement in question. The text should have read as follows:

The treatment of priapism remains largely surgical, but α-adrenoceptor agonists (for example, intracavernosal metaraminol) have been used. Diphenhydramine has also been used successfully in priapism secondary to chlorpromazine, α-adrenoceptor blockers and trazodone, and cyproheptadine and benztropine have been employed successfully in trazodone-induced priapism. None of these studies was controlled. Further information is available in the review by Banos and colleagues.

We regret the error.

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Reference

Change in Formulations for Acetazolamide and Allopurinol Suspensions

At The Hospital for Sick Children we have recently modified the way in which we prepare suspensions for acetazolamide and allopurinol. We now make them with the Ora-Plus® and Ora-Sweet® vehicles.

The revised formulas are presented here.

Acetazolamide 25 mg/mL Oral Suspension

<table>
<thead>
<tr>
<th>Ingredients</th>
<th>Manufacturer</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Acetazolamide, 250-mg tablets</td>
<td>Apotex*</td>
<td>10</td>
</tr>
<tr>
<td>Ora-Plus®</td>
<td>Paddock</td>
<td>50 mL</td>
</tr>
<tr>
<td>Ora-Sweet®</td>
<td>Paddock</td>
<td>50 mL</td>
</tr>
<tr>
<td>Ora-Plus® – Ora-Sweet® combination</td>
<td>The Hospital for Sick Children</td>
<td>qs 100 mL</td>
</tr>
</tbody>
</table>

* No substitution.
Equipment

glass mortar and pestle
125-mL graduated measure
glass stirring rod
100-mL clean amber bottle
shrink seal

Procedure

1. Measure out and mix together the Ora-Plus® and Ora-Sweet® vehicles.
2. Crush tablets in the mortar with pestle to a fine powder.
3. Add Ora-Plus® – Ora-Sweet® mixture to the mortar in small amounts until a smooth paste is formed. Add more vehicle to the paste until a liquid is formed. Transfer the contents into the graduated measure.
4. Use additional vehicle to rinse the remaining drug from the mortar and add it to the graduated measure.
5. Make up to the final volume of 100 mL using vehicle. Stir well.
6. Transfer the suspension into the amber bottle.
7. Label and affix shrink seal.
8. Highlight “new formulation” on the label.

Size: 100 mL
Amount: 1
Storage: Room temperature in amber glass or plastic bottles
Expiry: 60 days

Allopurinol 20 mg/mL Oral Suspension

<table>
<thead>
<tr>
<th>Ingredients</th>
<th>Manufacturer</th>
<th>Quantity</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allopurinol, 100-mg tablets</td>
<td>Novopharm*</td>
<td>40</td>
</tr>
<tr>
<td>Ora-Plus®</td>
<td>Paddock</td>
<td>100 mL</td>
</tr>
<tr>
<td>Ora-Sweet®</td>
<td>Paddock</td>
<td>100 mL</td>
</tr>
<tr>
<td>Ora-Plus® – Ora-Sweet®</td>
<td>The Hospital for</td>
<td>qs 200 mL</td>
</tr>
<tr>
<td>combination</td>
<td>Sick Children</td>
<td></td>
</tr>
</tbody>
</table>

* No substitution.

Ora-Plus® and Ora-Sweet® are distributed in Canada by Wiler Fine Chemicals, London, Ontario (800.668.9453).

These updated formulations and more than 20 others are available at our Web site (http://www.sickkids.on.ca/pharmacy/manu.asp).

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