

Indomethacin

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Indomethacin The generic of the drug is Indomethacin, and its trade is Indocin or Indocin-SR. Indomethacin is placed in the therapeutic category of the analgesic, anti-inflammatory, and antipyretic drugs. Indomethacin is made use of in order to treat the inflammation resulting from ankylosing spondylitis, rheumatoid arthritis, osteoarthritis, and gouty arthritis.

Indomethacin is also prescribed for the treatment of injuries of soft tissues like bursitis and tendinitis. Use of Indomethacin is restricted under special circumstances. It should not be taken when the patient is in the active condition of bleeding, or if the patient is drug allergic. Indomethacin also has some risk factors for pregnant patients. It should be avoided if the patient is in the pregnancy's third trimester. " In the fetus, indomethacin has been reported to cause constriction of the ductus arteriosus ... and decreased urine output ... frequently resulting in oligohydramnios" (Norton, 1997, p. 283).

Indomethacin exposes the neonate to a lot of risks that include but are not limited to pulmonary hypertension, ileal perforation, persistent ductus arteriosus, and intracranial hemorrhage (Norton, 1997, p. 283).

Contraindications of Indomethacin include active bleeding, renal impairment, aortic coarctation, thrombocytopenia, and necrotizing enterocolitis in the neonates. Side effects of indomethacin include pain in the injection site, redness, severe allergy in the form of hives, rashes, itching, tightness in the breast, and swelling on tongue, face or any feature of the face, blood in urine, stool or vomit, and decreased heartbeat rate. Dosage of indomethacin varies from case to case depending upon the disease. Dosage recommended for the treatment of osteoarthritis and rheumatoid arthritis is 25 mg twice or thrice a day.

References:

<https://assignbuster.com/indomethacin/>

Norton, M. E. (1997). Teratogen Update: Fetal Effects of Indomethacin Administration

During Pregnancy. *Teratology*. 56: 282–292. Retrieved from

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