**Flecainide (Tambocor) Considerations for Use***

US/FDA Approved Indications: Heart Rhythm Control for Atrial Fibrillation

<table>
<thead>
<tr>
<th>Black Box Warning*</th>
<th>Proarrhythmic. Increased mortality in patients with non-life-threatening ventricular arrhythmias, structural heart disease (ie, MI, LV dysfunction); not recommended for use with chronic atrial fibrillation.</th>
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<tr>
<td>Mechanism of Action</td>
<td>Depresses phase 0 depolarization significantly, slows cardiac conduction significantly (Class 1C).</td>
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</table>
| Dosing† | **Cardioversion:** 200 to 300 mg PO‡<sup>1</sup>  
**Maintenance:** 50 to 150 mg PO every 12 hrs  
**Hepatic Impairment:** Reduce initial dosage. Monitor serum level frequently. Allow at least 4 days after dose changes to reach steady state level before adjusting dosage.  
**Renal Impairment:**  
CrCl > 35 ml/min: No dosage adjustment is required.  
CrCl <= 35 ml/min: Initially, 100 mg PO once daily or 50 mg PO twice daily. Adjust dosage at intervals > 4 days, since steady-state conditions may take longer to achieve in these patient |
| Contraindications | • cardiogenic shock  
• sick sinus syndrome or significant conduction delay  
• 2nd/3rd degree heart block or bundle branch block without pacemaker  
• acquired/congenital QT prolongation  
• patients with history of torsade de pointes |
| Major Side Effects | hypotension, atrial flutter with high ventricular rate, ventricular tachycardia, HF |
| Dosage forms and Strengths | PO: 50, 100, 150mg tablets |
| Special Notes | Close monitoring of this drug is required.  
When starting a patient on flecainide, it is prudent to do a treadmill stress test after the patient is fully loaded.<sup>4</sup>  
Do not use in patients with ischemic heart disease or LV dysfunction; increases risk of arrhythmias.  
Additional AV nodal blocking agent may be required to maintain rate control when AF recurs. |
| Counseling | Report signs/symptoms of new or worsening cardiac failure, arrhythmias, or chest pain. |

*Refer to prescribing information for more complete information.  
†Dosages given in the table may differ from those recommended by the manufacturers.

**Sources:**