Ibutilide (Corvert) Considerations for Use*

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

Black Box Warning*	**Proarrhythmic; only administer by trained personnel with continuous ECG monitoring, capable of identifying and treating acute ventricular arrhythmias. Potentially fatal ventricular arrhythmias may occur with/without QT prolongation and can lead to torsade de pointes.**
Mechanism of Action	Prolongs cardiac repolarization (Class III antiarrhythmic properties).
Dosing†	Cardioversion: 1 mg IV over 10 min; repeat 1 mg when necessary (but risk of proarrhythmia increases) Hepatic Impairment: No adjustments needed Renal Impairment: No adjustments needed
Contraindications	Not applicable
Major Side Effects	QT prolongation, torsades de pointes
Dosage forms and Strengths	IV: 1 mg/10mL solution for Injection
Special Notes	Consider giving magnesium 2 grams IV prior to giving ibutilide to reduce risk of torsades. Potassium and magnesium levels should be within normal range prior to initiating and during therapy. Keep on cardiac monitor at least 4 h. Use with caution, if at all, when QT interval is > 500 ms, severe LV dysfunction, or in patients already using class Ia or III antiarrhythmics. Stop infusion when arrhythmia is terminated.
Counseling	Not applicable

*Refer to prescribing information for more complete information.

†Dosages given in the table may differ from those recommended by the manufacturers.

Sources:

1. American College of Cardiology (ACC), American Heart Association (AHA), and the European Society of Cardiology (ESC). *ACC/AHA/ESC 2006 Guidelines for the Management of Patients With Atrial Fibrillation*. Washington, DC: American College of Cardiology.
2. Heart Rhythm Society. *AF360 Pocket Guide: Practical Rate and Rhythm Management of Atrial Fibrillation*. 2010, Washington, DC: Heart Rhythm Society.
3. *Tarascon Pocket* Pharmacopoeia®2012.