

This information was up to date at the time of release to the Heads of Midwifery.

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Updating arrangements for the formulary should be decided upon and implemented at a local level.

<b>Alginate antacids</b>	
<b>Legal status</b> (GSL, P or POM on exemption list, or PGD)	GSL - midwife may supply
<b>Patient group</b>	Pregnant women with heartburn.
<b>Clinical indication</b>	Heartburn, which has not responded to simple lifestyle changes
<b>Pharmacology</b> (Onset and duration of action where appropriate)	<p>Compound alginic acid is an antacid which neutralises gastric acid thereby preventing inflammation, relieving pain and allowing oesophageal mucosa to heal.</p> <p>It contains an alginate, which acts as a protectant and is meant to float on top of the stomach contents and act as a physical barrier, protecting the oesophagus against the harmful effects of reflux.</p>
<b>Pharmaceutical form, strength, route of administration</b>	<p>Suspension (sugar free) Aniseed flavoured (pink) or peppermint flavoured (white) liquid. Each 5ml contains; sodium bicarbonate 133.5mg, sodium alginate 250mg and calcium carbonate 80mg.</p> <p>For oral administration Various different brands including Peptac®</p>
<b>Dose, frequency and maximum number of doses or period of time for administration or supply</b>	<p>10-20 ml three times daily 20 minutes to an hour after meals and at bedtime, or as required (maximum 4 times daily).</p> <p>Usually a 20ml dose will be required.</p> <p>Throughout pregnancy.</p>
<b>Contra-indications/exclusion criteria</b>	<ul style="list-style-type: none"> <li>▪ known hypersensitivity to any component of the medicine</li> </ul>
<b>Cautions and action that will be taken if a caution applies</b>	<ul style="list-style-type: none"> <li>▪ during labour - (risk of aspiration of particulate antacid)</li> <li>▪ it contains sodium – 3.1mmol in each 5 ml of liquid - caution is required in highly restricted salt diet in severe cardiac or renal disease</li> <li>▪ care is needed in patients with hypercalcaemia, nephrocalcinosis and recurrent calcium containing renal calculi</li> <li>▪ check for and document any allergies</li> <li>▪ check and document past medical and drug history and current medication to ascertain potential for overdose</li> <li>▪ if a caution applies consult with a doctor</li> <li>▪ document consultation in maternity record</li> </ul>

## Alginate antacids

<b>Medicine interactions and action that will be taken if a patient is taking a medicine that may interact</b>	<ul style="list-style-type: none"> <li>▪ antacids should not be taken at the same time as other drugs as they may impair their absorption</li> <li>▪ in obstetrics, the reduction in the absorption of oral iron may be clinically important - allow at least 2 hours between the administration of antacids and oral iron</li> <li>▪ reduced absorption of certain drugs from the following groups: ACE inhibitors, antibacterials, antiepileptics, antifungals, antimalarials, antipsychotics, antivirals, bisphosphonates, bile acids, deflazacort, diflusal, digoxin, dipyridamole, lansoprazole, levothyroxine, mycophenolate - consult BNF</li> <li>▪ increased excretion of aspirin and lithium and reduced excretion of quinidine</li> <li>▪ if there is a clinically significant drug interaction, consult with a doctor before administration or supply</li> <li>▪ document consultation in maternity record</li> <li>▪ refer to current BNF for latest information on interactions</li> </ul>
<b>Potential adverse reactions and side effects including actions to be taken if adverse medicine reaction is suspected</b>	<ul style="list-style-type: none"> <li>▪ <i>constipation</i></li> <li>▪ <i>flatulence</i></li> <li>▪ <i>stomach cramps</i></li> <li>▪ <i>belching</i></li>   <li>▪ <i>on labour</i>                                <i>Nil</i></li> <li>▪ <i>on the neonate</i>                                <i>Nil</i></li> <li>▪ <i>on breast feeding</i>                                <i>Nil</i></li>   <li>▪ <i>if a serious adverse reaction is suspected please report to the MHRA Yellow Card Scheme <a href="http://yellowcard.mhra.gov.uk/">http://yellowcard.mhra.gov.uk/</a></i></li> </ul>
<b>Overdose</b>	<ul style="list-style-type: none"> <li>▪ unlikely to cause any serious problems as alginate is not absorbed and sodium and calcium carbonate concentrations are relatively low</li> <li>▪ immediate assessment/treatment is essential - refer to medical staff</li> <li>▪ manage in accordance with established treatment guidelines or see BNF overdose section</li> <li>▪ for further advice contact National Poisons Centre 0344 892 0111</li> </ul>
<b>Action if patient declines</b>	<ul style="list-style-type: none"> <li>▪ refer to authorised prescriber or doctor</li> <li>▪ document in maternity record</li> </ul>
<b>Additional advice and information</b>	<ul style="list-style-type: none"> <li>▪ do not take within 2 hours of taking other medicines</li> <li>▪ advise to contact midwife/GP if condition worsens or symptoms persist</li> <li>▪ give the manufacturer's patient information leaflet to the woman</li> </ul>
<b>Patient monitoring arrangements during and after treatment and follow-up required</b>	<p>If response is inadequate consider alternative antacid.</p>
<b>Particular storage requirements</b>	<p>-</p>
<b>References</b> <ol style="list-style-type: none"> <li>1. Summary of Product Characteristics compound alginate susp. Pinewood Laboratories Ltd. Text revision 26.2.2018. Accessed 23.12.2019 <a href="http://www.medicines.org.uk">http://www.medicines.org.uk</a></li> <li>2. <a href="http://www.bnf.org">http://www.bnf.org</a></li> </ol>	