



## C-Obs 15

# The use of nifedipine in obstetrics

There is considerable evidence in published studies concerning the use of nifedipine in obstetrics for the treatment of threatened preterm labour and for hypertension in pregnancy.

### Attitude of the pharmaceutical industry

The current production information for nifedipine lists its use in pregnancy as a contraindication. As the use of nifedipine in pregnancy is therefore "off-label", no liability would be accepted by the company for any adverse events.

### Precautions

In accordance with usual practice, Fellows should be familiar with the published literature and drug information provided before prescribing the drug.

Particular attention is drawn to concerns with the use of nifedipine in combination with magnesium sulphate or where there is underlying cardiac disease.

As with all therapeutic agents, practitioners should take particular care to use nifedipine according to regimens for which evidence is available. Where nifedipine is the most appropriate therapeutic option, it should be available for use according to established medical evidence.

Where trainees and junior medical staff are involved in care, it is reasonable to expect that consultants will accept responsibility for the use of nifedipine in any given clinical situation, through either:

- establishment of formal protocols which clearly list indications and contraindications for use, triggers for consultation and drug regimens

or

- supervision on a case by case basis, with documentation in the medical record by junior staff where appropriate e.g. "for nifedipine (dose/route/regimen) as discussed with Dr X"

The references cited below include information about regimens evaluated.

### References

King JF, Flenady VJ, Papatsonis DNM, Dekker GA, Carbonne B. Calcium channel blockers for inhibiting preterm labour (Cochrane Review). In: *The Cochrane Library*, Issue 4, 2002. Oxford: Update Software.

Papatsonis DNM, Lok CAR, Bos JM, van Geijn HP, Dekker GA. Calcium channel blockers in the management of preterm labour and hypertension in pregnancy. Eur J Obstet Gynecol Repr Biol 2001; 97: 122-40.

Duley L, Henderson-Smart DJ. Drugs for rapid treatment of very high blood pressure during pregnancy (Cochrane Review). In: the Cochrane Library, Issue 1, 2001. Oxford Update Software.

Abalos E, Dudley L, Steyn DW, Henderson-Smart DJ. Antihypertensive therapy for mild to moderate hypertension during pregnancy (Protocol for a Cochrane Review). In: the Cochrane Library, Issue 1, 2001. Oxford Update Software.

NSW Department of Health Circular, File No 02/1303, Circular No 2002/49, Issued 23 April 2002 'Protocols for Administration of tocolytic agents (intravenous salbutamol or oral nifedipine) for threatened preterm labour'.

### **Links to other related College Statements**

[C-Gen 2 Guidelines for consent and the provision of information regarding proposed treatment.](#)

#### **Disclaimer**

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The statement has been prepared having regard to general circumstances. It is the responsibility of each Practitioner to have regard to the particular circumstances of each case, and the application of this statement in each case. In particular, clinical management must always be responsive to the needs of the individual patient and the particular circumstances of each case.

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