

The Carlat Psychiatry Report

ANTABUSE (disulfiram) Fact Sheet

Manufacturer: Odyssey Pharmaceuticals; available as generic disulfiram.

Indications:

- Helpful in the treatment of a select subpopulation of alcoholics who are highly motivated to stay sober and who are receiving supportive therapy, either from a professional or in the context of Alcoholics Anonymous.

Mechanism: Blocks the metabolism of acetaldehyde, causing it to build up to 5 to 10 times the level normally present after a drink of alcohol, causing a highly unpleasant reaction when any alcohol is ingested.

Dosing:

- Supplied as 250 mg tablets (breakable).
- Manufacturer recommends starting at 500 mg QD but this is rarely done, because of side effects.
- More reasonable dosing is to start at 125 mg QPM, and to increase to 250 mg QPM after several days.
- Maintenance dose is usually 250 mg QPM, but some patients can drink without a reaction on this dose; if so, increase to 375 mg or 500 mg QPM.

Side Effects:

- Common: Initial fatigue, nausea, diarrhea, metallic taste in mouth.
- Uncommon but potentially dangerous:
 - Can cause elevated liver function tests and even hepatitis.
 - Can cause peripheral neuropathy and optic neuritis.

Drug-drug interactions:

- Contraindicated in combination with alcohol. The alcohol-disulfiram reaction can cause flushing, headache, nausea, vomiting, tachycardia, and in very rare instances, cardiovascular collapse and death. Common advice to patients: "You'll wish you were dead but it won't kill you."
- Antabuse has a long half-life, so an alcohol reaction can occur as long as a week after the last dose. On the other hand, alcohol is rapidly metabolized, so patients can take their first dose 12 hours after their last drink.
- Warn patients not to combine Antabuse with: Flagyl (an antibiotic), paraldehyde (a sedative rarely used these days), over-the-counter medications that contain small amounts of alcohol, like many cough syrups and Nyquil.
- Do not give to patients with severe cardiac disease or to patients who are acutely psychotic.
- Can increase levels of Dilantin, Coumadin, and isoniazid.

Laboratory monitoring:

- Check LFTs at baseline and periodically thereafter.