

### Beta-Adrenergic Blockers "-olol" (Antagonists)

Slow heart rate and reduce BP

(Negative) inotropic effect

Reduce workload of heart

### PROTOTYPE DRUG

metoprolol (Lopressor, Toprol XL)

### ADVERSE EFFECTS

Fluid retention

Worsening of HF

Fatigue

Hypotension

Bradycardia

Heart block

### MECHANISM OF ACTION

Block cardiac action of SNS to slow HR and BP, reducing workload of the heart

### PRIMARY USE

Reduce symptoms of HF

Slow progression of disease

(Metoprolol also approved for angina, HTN and reducing cardiac complications following an MI)

### NURSE'S ROLE

#### MONITOR FOR:

worsening symptoms

liver function/hepatic toxicity

Be aware of **contraindications**:

-- (patients with cardiogenic shock, sinus bradycardia, heart block greater than 1st degree, hypotension, and overt HF.)

-- (Use with caution in patients with asthma and those with a hx of bronchospasm bc the drug may affect beta2 receptors at high doses.)

#### PATIENT TEACHING:

monitor BP

report pulse below 50

report s/s of worsening HF

do not stop taking abruptly



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