

## Frequently Asked Questions:

### 1. What is Amiodarone and why is it prescribed?

Amiodarone, marketed as Cordarone or Pacerone in the U.S., is an anti-arrhythmia drug used to treat irregular heartbeat. Millions of cardiac patients each year receive this drug. Few are given full information about its dangers.

Amiodarone contains approximately 37% iodine by weight. Each 200-mg tablet is estimated to contain about 75 mg of organic iodide, 8-17% of which is released as free iodide. Standard maintenance therapy with 200 mg amiodarone can provide more than 100 times the daily iodine requirement. It is highly lipid-soluble and is concentrated in the adipose tissue, muscle, liver, lung, and thyroid gland.

### 2. What are the side effects?

The most severe side effect, pulmonary toxicity has resulted in rates as high as 10% to 17% in patients taking Amiodarone with 10% of those cases resulting in death. Other side effects include liver damage, vision problems including loss of sight, nerve damage (peripheral neuropathy) and loss of thyroid function. The vast majority of people have some type of side effect when taking Amiodarone.

### 3. If I stop taking it will the symptoms stop?

Amiodarone has a long half life in your body. That is to say it takes many weeks/months for your body to rid itself of the drug. This is because the drug is stored in skin and intestinal GI tract cells and these cells need to be shed by the millions in order for the drug to exit the body. As a result, even if you stop taking Amiodarone you have to wait a long time to see the results.

### 4. Is there a safe dosage?

Since a single dose can cause irreversible damage, pursuing a drug therapy that includes Amiodarone should be considered only by those who have no other choice. Amiodarone should only be used when other alternatives have been exhausted. Since the side effects can be so severe, the FDA has in its approval labeled it a drug of LAST RESORT.

### 5. How did this drug get FDA approval?

The FDA was reluctant to officially approve the use of amiodarone, since initial reports had shown increased incidence of serious pulmonary side-effects of the drug. In the mid 1980s, the European pharmaceutical companies began putting pressure on the FDA to approve amiodarone by threatening to cut the supply to American physicians if it were not approved. Up until this time U.S. doctors were obtaining Amiodarone from pharmaceutical companies in Canada and Europe. Then in December 1985, amiodarone was approved by the FDA for the treatment of ventricular arrhythmia. This makes amiodarone one of the few drugs approved by the FDA without rigorous randomized clinical trials.

### 6. My doctor has prescribed Amiodarone...what should I do?

Ask questions! Information is power. Do not let your physician intimidate you or dodge your questions. Amiodarone is a killer, plain and simple. If your doctor brushes your concerns aside, confront him with published information, such as the FDA drug insert (demand it from a pharmacist, or print it from many online resources, including the FDA's own website).

Be aware of the symptoms of amiodarone's worst side effects: shortness of breath, tiredness, numbness or loss of coordination in the arms or legs, vision problems. Insist that your doctors investigate such symptoms immediately with scans, blood tests, or other procedures. Important note: pulmonary damage cannot be diagnosed with an x-ray only; insist on CT scans, and have them compared to any CT scans done before amiodarone was begun. Time is of the essence, because so many of amiodarone's toxicities are slow to reverse, if reversible at all. And despite what many doctors will argue, **amiodarone can cause fatal, irreversible damage in a matter of days or week, not just months and years.**

**Also, read the personal reports in our website, [www.amiodaronetoxicity.com](http://www.amiodaronetoxicity.com) or with our Facebook group, STOP AMIODARONE and join the discussions. These are the stories of ordinary people whose lives have been impacted by this drug.**

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[www.amiodaronetoxicity.com](http://www.amiodaronetoxicity.com)

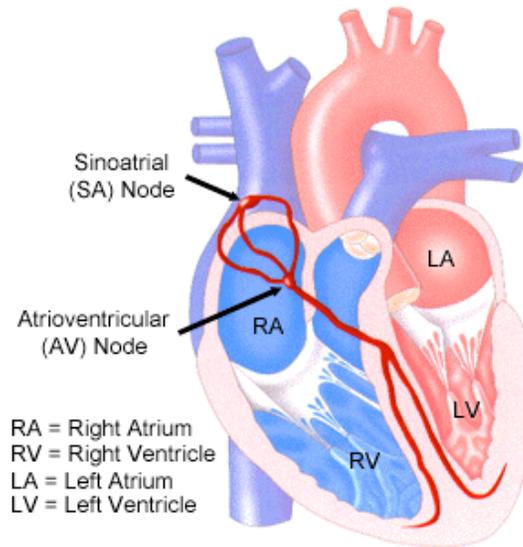




# AMIODARONE TOXICITY

Amiodarone has a peculiar and twisted history of approval for use in the U.S. It was never tested in the elderly and it bypassed most clinical trials and was fast-tracked for marketing. The FDA only approved its use as a drug of last resort for “life threatening ventricular fibrillation for which other therapies have proven ineffective.” Those types of arrhythmias are relatively rare (and often fatal) compared to atrial fibrillation, which is a much more common condition that requires long-term treatment. So amiodarone is routinely prescribed in an “off-label” use for a-fib and a-flutter—which is by far a bigger market for manufacturers. Off-label use of a prescription drug is not illegal, but in the case of amiodarone, it has led to widespread ignorance among doctors, even, about its safety, since they often rely on the pharmaceutical salespeople for information about a drug’s appropriate use. *Your own doctor’s lack of awareness regarding the common fatal effects of Amiodarone could cost you your life.*

**The people pictured above paid the ultimate price and lost their lives to this drug. The gentleman at right lost his eye sight. They are not exceptions but represent over 14,900 pages of a report of death and injury that the FDA has received since 1997.**



**Amiodarone is often prescribed for Atrial Fibrillation although it is not FDA approved for this use.**

**This drug should be used only as a LAST RESORT since its use leads to many side effects in the vast majority of people including death.**

Millions of cardiac patients worldwide receive the arrhythmia drug AMIODARONE each year marketed as Cordarone and Pacerone, among other names.

What many of them are never told—and don’t learn until it’s too late—is that the drug has a host of toxic side effects, including fatal lung disease (pulmonary fibrosis), liver & thyroid failure, blindness (optic neuropathy) and a crippling loss of sensation in the arms and legs (peripheral neuropathy).

