

LISINOPRIL

ACE inhibitor “pril”

Indications

- Hypertension
- Heart failure (adjunctive)
- Within 24 hours s/p STEMI for hemodynamically stable patients

Action

Inhibits angiotensin-converting enzyme (ACE) → stops conversion of angiotensin I to angiotensin II (vasoconstrictor) → vasodilation. Angiotensin II reduces aldosterone → sodium reabsorption and potassium secretion; → potassium sodium can result.

Top Side Effects

CV: Hypotension

F&E: Hyperkalemia

Renal: Renal insufficiency

Resp: Dry, nonproductive, hacking cough (short term); **angioedema**

Neuro: Dizziness, headache

Nursing Implications

- Monitor BP, K+, BUN, CRE
- Use caution with other BP lowering medications
- Use caution when patient at risk for renal failure (medications, disease)

Contraindications

Hyperkalemia, hx angioedema, renal failure w/ prior use

Patient Education

- Monitor BP
- Do not take with alcohol
- Limit potassium
- Angioedema can occur at any point. Report right away

Top Tested Tips

Angioedema (report, stop med, s/s); contraindications/hold med/monitor (hyperkalemia, hypotension, hx angioedema w/ ACE-I), kidney failure); indications