Fenofibrate - Dosage | Interactions | Effects

Fenofibrate is the drug that belongs to the family of drugs used to lower triglyceride levels in the blood. Chemically, it is classified as fibric acid derivatives (so-called fibrates). It is indicated in the following conditions:

- Hypertriglyceridemia
- Mixed dyslipidemia
- Primary hypercholesterolemia
- Atherogenic dyslipidemia in diabetics
- Atherogenic dyslipidemia in patients with the metabolic syndrome

Fenofibrate increases the level of "good" HDL cholesterol and lowers levels of triglycerides and "bad" LDL cholesterol.\textsuperscript{1,2} Its use in diabetic patients reduces the risk of atherosclerosis and diabetes complications (heart attack and stroke). Its use in patients with diabetes also leads to a reduction in the risk of diabetic retinopathy (damage to the retina of the eye).\textsuperscript{3}

Safety precautions

Much like the statins (cholesterol-lowering drugs), fibrates can cause myopathy and rhabdomyolysis (severe damage to the muscles, which may have a fatal outcome)! It is therefore necessary to call your doctor as soon as possible at the first occurrence of changes in the muscles (unusual pain, inflammation, cramps and weakness).

Fenofibrate may cause the appearance of stones in the bile ducts and gallbladder. Your doctor should be notified if you already have a stone in the bile ducts or gallbladder.
Very rarely, Fenofibrate may cause inflammation of the pancreas which is manifested by the following symptoms:

- Fever
- Constipation
- Nausea
- Severe abdominal pain that extends to the back

If you notice the above symptoms, contact a physician immediately.

Fenofibrate may cause Stevens-Johnson syndrome (a severe damage to the skin), and you must contact your doctor if you experience unusual blistering or redness of the skin.

Apply Fenofibrate cautiously if you have any of the following conditions:

- Photoallergy
- Allergic reaction to peanuts
- Kidney disease
- Liver disease
- Pancreas disease
- Hypothyroidism

If you are older than 70 years or if you are pregnant or breastfeeding, you must avoid its use.

**Fenofibrate and its use during pregnancy and breastfeeding**

Fenofibrate should not be used during pregnancy. One case of its use for the treatment of hypertriglyceridermia-induced pancreatitis in pregnant women without having any adverse effects on fetus has been reported. However, the FDA has classified this drug in group C, because studies in animals have shown adverse effects of this drug on the fetus.

Avoid breastfeeding while taking Fenofibrate.

**Dosage**

Swallow the capsules whole with water. It is very important that you take Fenofibrate during meals, since its absorption and release in the blood can be reduced when it is taken on an empty stomach. It is best to take the drug during the evening meal because it has somewhat better efficacy in the night than if you take it during the day.

The usual dose is 160 mg once a day. If this dose is too strong for you, your doctor may decide that you take this medication every second or every third day. This way of application will reduce the risk of adverse effects.

**Interactions**

Fenofibrate interacts with the following medications:

- **Statins** (e.g. fluvastatin, pravastatin, simvastatin, atorvastatin, rosuvastatin, lovastatin, and others). Concomitant use increases risk of rhabdomyolysis and liver damage.
- Mipomersen (Kynamro) - a drug used to lower cholesterol levels. Concomitant use increases the risk of liver damage.
Leflunomide and teriflunomide (immunosuppressive disease-modifying antirheumatic drug - DMARD) used for the treatment of rheumatoid arthritis. Co-administration with Fenofibrate increases the risk of liver damage.

Warfarin (Coumadin) and dicoumarol, so-called anticoagulants. Co-administration with Fenofibrate increases risk of bleeding.

Adverse effects

Fenofibrate may cause the following adverse effects:

- Flatulence
- Diarrhea
- Abdominal pain and nausea
- Elevated liver enzyme levels in the blood
- Thromboembolism
- Inflammation of the pancreas
- Hair loss
- Changes in muscle
- Myopathy
- Photosensitivity
- Steven-Johnson syndrome
- Decreased libido
- Stone formation in the bile ducts
- A decrease in hemoglobin levels
- The dark color of urine
- Yellow colored eyes
- Agitation
- Swollen joints

References

1. NCBI link 1
2. NCBI link 2
3. NCBI link 3
4. Toxnet link
5. NCBI link 4