

Додаток 3: Табела – Лекови и летање

<p>ЛЕКОВИ И ЛЕТАЊЕ</p> <p>MEDICATION END FLYING</p> <p>Ref JAA MANUAL OF CIVIL AVIATION MEDICINE 2009, Chapter 19</p>

Вовед/Introduction

Целта на следната табела е да се дадат насоки, со тоа што имињата на лековите се даваат само како пример. Фактот дека лековите се наведени како компатибилни не значи дека пилотите смеат да ги користат. Секој случај треба да биде разгледан на индивидуално ниво во однос на пациентот и лекот, водејќи при тоа сметка за саканите и штетните последици во летачкото опкружување. Табелата ги вклучува само оние лекови кои се најпознати и кои најмногу се користат, односно чие што влијание и нуспојави се добро познати. Заради тоа најсовремените терапии можеби нема да бидат спомнати затоа што целосниот спектар на нуспојави на новите терапии често се воочува дури после нивната неколкугодишна општа употреба. Меѓутоа, со оглед на безбедноста во воздухопловството, пилотите не би смееле да бидат експериментална популација за новите терапии. Фактот дека некои лекови можеби не се спомнати не значи дека тие лекови се неприфатливи при лечење на пилотите. Кај поедини случаи, одлуката за или против одреден лек може да отстапува од препораката на наведените во ваа табела.

Во случај на дилема или дополнителни прашања обратете се во Отсекот за воздухопловна медицина.

The following table is intended to provide guidance. Names of medications are given as examples only. The fact that medications are listed as compatible does not mean that they may be used by pilots. Each case has to be considered regarding the individual patient and the respective medication with regard to intended effects and adverse effects in the flying environment. The table includes only the mostly used and mostly known medications whose effects and adverse effects are wellknown. Therefore, the most advanced therapies might not be mentioned. With regard to the latter it has to be stated that the full spectrum of adverse effects of a new treatment is often only revealed after being some years in general use. However, with regard to aviation safety, pilots should not be a test population for new therapies. The fact that some medications might not be mentioned does not mean that they are unacceptable for pilots, in individual cases the decision pro or contra a certain medication might differ from the recommendations in this tables.

	Generic International Name		Remarks
	<i>compatible</i>	<i>incompatible</i>	
Digestive Pathology			
<i>Anti- ulcer medicines</i>	RANITIDINE		
	CIMETIDINE		
	OMEPRAZOL		
Treatment of inflammatory colitis	MESALAZINE	SALAZOSULFAPYRIDINE	Oral aminosalicylates such as Mesalazine may be acceptable. Minimal medication such as sulphasalazine or local medication like steroid or sulphasalazine enema or suppository may be acceptable

	Generic International Name		Remarks
	compatible	incompatible	
Digestive Pathology			
Anti -spasmodics		DICYCLOMINE	Atropine-like side-effects preclude the use
		MEPENZOLATE	
		PIPENZOLATE	
		POLDINE	
		PROPATHELINE	
		ALVERINE	
		MEBEVERINE	
	PEPPERMINT OIL		
Anti -diarrheals	LOPERAMIDE	LOPERAMIDE	Depending on individual case
		COPHENOTROPE	
		CODEINE PHOSPHATE	
Anti-haemorrhoids			Local medication like steroid or sulphasalazine enema or suppository may be acceptable
Treatment of Gallstone			Not compatible because of risk of cholecystitis, pancreatitis diarrhoea
Gastrointestinal colic	TRIMEBUTINE		May be acceptable with minor colics after organic disease is ruled out
	MEBEVERINE		
Kinetosis, motion sickness			Interference with alertness not acceptable
3 CARDIOVASCULAR SYSTEM			
3.1 ANTI-HIPERTENSIVE DRUGS			
Beta blockers	ATENOLOL		
	METOPROLOL		
	BISOPROLOL		
Diuretics	THIAZIDICS		
	SPIRONOLACTONE		
		FUROSEMIDE	
Angiotensin converting enzyme inhibitors	CAPTOPRIL		
	ENALAPRIL		
	LISINOPRIL		
Angiotensin II Receptor Antagonists	CANDESARTAN		
	EPROSARTAN		
	IRBESARTAN		
	LOSARTAN		
	TELMISARTAN		
	VALSARTAN		
Calcium channel blockers	DILTIAZEM		
	VERAPAMIL		
	NICARDIPINE		
	NITREDIPINE		
Central anti-hypertensive drugs		CLONIDINE	
		ALPHAMETHYL-DOPA	
Vazodilating antihypertensive drugs		DIHYDRALAZINE	
		PRAZOZINE	
		URADIPIL	

	Generic International Name		Remarks
	compatible	incompatible	
3.2 ANTI – ARRHYTHMIC DRUGS			
Vaughan Williams Class I		CHINIDIN, DISOPYRAMID, AJMALIN, LIDOCAIN, PHENYTOIN, PROPAFON, FLECAINID, MEXITILLINE	
Vaughan Williams Class II	ATENOLOL, METOPROLOL, BISOPROLOL		
Vaughan Williams Class III	SOTALOL, AMIODARON	SOTALOL, AMIODARON	In general not acceptable, in selected cases up to AMS after expert`s consultation
Vaughan Williams Class IV	VERAPAMIL		
Other anti- arrhythmic drugs	DIGITALICS		
3.3 ANTICOAGULANTS			
		HEPARINE	After deep vein thrombosis a subcutaneous injection of low molecular heparin may be acceptable prior to a long distance flight
		RHENIDIONE	
		ACENO COUMAROL	
		WARFARINE	
	ASPIRIN		
	DIPYRIDAMOL		
3.4 ANTIANGINAL			
		NITRATES	
		MOLSIDOMINE	
4 RESPIRATORY SYSTEM			
4.1 TREATMENT OF ASTHMA			
Theophylline derivatives		THEOPHYLLINE	
Oral steroids			Not acceptable
Leukotriene receptor agonists			May be acceptable
Respiratory aerosols	SALBUTAMOL		
	OXYTROPOLIUM BROMIDE		
	BECLOMETHASONE		
	CROMOGLYCIN SODIUM		
4.2 ANTITUSSIVE MEDICATION			
Antitussive opioids			Not acceptable
4.3 ANTIALLERGIC MEDICATION			
Sedating antihistaminics			Not acceptable
Non-sedating antihistaminics			May be acceptable
4.4 Expectorants			
Mucolytic agents	BROMHEXIDINE		
	ACETYLCYSTEINE		
	CARBOCYSTEINE		
5 ENDOCRINOLOGY			
5.1 Hypothyroidism	LEVOTHYROXINE SODIUM		
5.2 Hyperthyroidism		CARBIMAZOLE	
Anti-thyroid drugs		BENZYL THIOURACILE	
5.3 HORMONAL TREATMENTS OF GYNECOLOGICAL DISEASES			
Progestative	MEDRXYPROGESTERONE		
	LYNESTRENOL		
	LEVONORGESTREL		
	NORETHISTERONE		
	NORGESTRIEONE		

	GENERIC INTERNATIONAL NAME		Remarks
	<i>compatible</i>	<i>incompatible</i>	
6 METABOLIC DISEASES			
6.1 DIABETES			
Insulin		INSULIN	Not acceptable
Sulphonylurea			Not acceptable, may be acceptable in selected cases for Class 2
Glinides			Not acceptable, may be acceptable in selected cases for Class 2
Biguanides	METFORMIN		for Class 2, for Class 1 with an OML
Alpha-glucosidase inhibitors Glitazones (Thiazolidinediones)	ACARBOSE		
	ROSIGLITAZONE		For Class 2, for Class 1 with an OML
	PIOGLITAZONE		For Class 2, for Class 1 with an OML
6.2 Dyslipidemia	PRAVASTATINE		
		SIMVASTATINE	
	CHOLESTYRAMINE		
	FENOFIBRATE GEMFIBROZIL		
6.3 Hyperturicemia	ALLOPURINOL		
		COLCHICINE	
6.4 Obesity	ORLISTAT		May be acceptable if dietary measures insufficient
	METHYLCELLULOSE		
7 NEUROLOGY			
7.2 Parkinson`s disease		LEVODOPA etc.	Medication for advanced disease not acceptable
	AMANTADINE SELEGELINE		May be acceptable for early, minor symptoms
7.3 Migraine			Beta-blockers may be acceptable for prophylaxis
7.4 Smoking cessation			Bupropion not acceptable. Nicotine replacement may be acceptable
8 PSYCHIATRY			
Sleep disorders		ZOLDIPEM	
		ZOPLICONE	
		MELATONINE	
9 ANALGESIC END ANTI-INFLAMMATORY DRUGE			
9.1 Analgesics			
Central analgesics and narcotics morphinics		MORPHINE	

		CODEINE	
		CODETHYLINE	

	Generic International Name		<i>Remarks</i>
	<i>compatible</i>	<i>incompatible</i>	
9.1 Analgesics			
		COCAINE	
		CANNABIS	
	PARACETAMOL		
	ACETYL SALICYLIC ACID		
	DERIVED OF PROPIONIC ACID		
9.2 Anti- inflammatories			
Steroid anti-inflammatories			All incompatible
Non steroid anti-inflammatories	DICLOFENAC		
10 TREATMENTS OF INFECTIONS			
10.1 Antibiotics			
Macrolides		JOSAMYCINE	
Beta-lactamines		PENICILLINE	
Phenicoles		CHLORAMPHENICOL	
10.2 Antiviral treatment			
Antiviral treatment		AZIDOTHIAMINE	In clinically stable HIV infection combination antiretroviral treatment may be acceptable
		DDI	
		INTERFERON	
10.3 Vaccinations			
Vaccinations			All compatible, minimum period of 24 h next flight
10.4 Anti-malarials			
Anti-malarials	CHLOROQUINE		
	PROGUANIL		
		MEFLOQUINE	
	ATOVAQUONE/PROGUONAL		
11 DERMATOLOGY			
Keratolytic treatments		ETRETINATE	
Dermatological topical treatments		ISOTRETINOID	
		CYPROTERONE ACETATE	
		GAMOLENIC ACID	
12 EAR, NOSE and THROAT			
12.1 Decongestive drugs	CLOBUTINOL		
	OXELADINE		
12.2 Mucolytic agents			See 4.4
12.3 Antihistamines			See 4.3
14 GENITO-URINARY			
14.1 Benign prostatic hyperplasia			
Selective alpha-1 blockers			May be acceptable
5- alpha reductase inhibitors			
14.2 Urinary incontinence			
			Some anti-muscarinic medications may be acceptable
14.3 Erectile dysfunction			
Phosphodiesterase-type-5-inhibitors		SILDENAFIL	12 – 24 h shall elapse prior to flying

	Generic International Name		Remarks
	<i>compatible</i>	<i>incompatible</i>	
15 MALIGNANT DISEASE			
15.1 Cytotoxic medication			Disqualifying
15.2 Immunosuppressant			Disqualifying
15.3 HORMONES			
Oestrogens			May be acceptable
Progestogens			
Hormone antagonists			
Gonadorelin analogues			
Anti- androgens			