Ivabradine (Procoralan®) for the treatment of Postural Orthostatic Tachycardia Syndrome (POTS)

Information for patients
South Yorkshire Regional Cardiac Rhythm Management Service

Please read this leaflet carefully before you start taking this medicine. If you have any further questions, ask your doctor or pharmacist. This leaflet should be read with the manufacturer's leaflet.

1. What is Ivabradine and what is it used for?

Ivabradine was approved for the treatment of chest pain in patients with coronary heart disease. It is marketed under the trade name Procoralan®. Ivabradine mainly works by reducing the heart rate and in this way Ivabradine helps to control and reduce the number of angina attacks.

Your doctor has prescribed Ivabradine for the treatment of POTS and not for the treatment of coronary heart disease. However, patients with POTS do experience an inappropriate fast heart rate at times. Ivabradine in not licensed for use in POTS. However, by reducing the heart rate it should also be beneficial in POTS and the reported experience with this drug is favourable.

There are other medicines that can be used for POTS. These are not licensed for this condition either. You may wish to discuss these with your doctor.

2. How should Ivabradine be taken?

Ivabradine comes in 5mg and 7.5mg tablets. The starting dose is usually half a tablet of Ivabradine 2.5mg taken four times a day (at three to four hourly intervals). You should take the first dose when you get up in the morning. Ivabradine should be taken during meals.

The nurse specialist will arrange to see you to review how you are feeling with this tablet. It is important to take note of the amount of palpitations you are having and whether they are reduced having taken this tablet. The nurse specialist can advise you as to whether you need to increase the dose at your appointment.

The maximum dose you should be taking a day is 15mg. Higher doses may be given on the advice of one of our consultants. Always take Ivabradine exactly as your doctor has told you.
3. Are there any side effects from taking Ivabradine?

As with all medicines there is a risk of side effects although not everybody gets them. Most commonly, taking Ivabradine can cause luminous visual phenomena (brief moments of increased brightness, most often caused by sudden changes in light intensity), slowing down of the heart rate, abnormal perception of heartbeat, headache, dizziness and blurred vision.

Less commonly Ivabradine can cause palpitations and extra heart beats, feeling sick (nausea), constipation, diarrhoea, spinning sensation (vertigo), difficulty breathing (dyspnoea), muscle cramps.

If any of the side effects gets serious or if you notice any side effects not listed in the manufacturer's leaflet, please tell your doctor or pharmacist.

4. Special information for women taking Ivabradine

Ivabradine is not recommended during pregnancy or breast feeding. If you wish to become pregnant it is important to discuss this with your doctor beforehand. If you are pregnant and have taken Ivabradine, talk to your doctor.

5. Where will I get further supplies from?

If you are prescribed Ivabradine tablets it should be possible for your GP to prescribe further supplies once you are stable on this medication.

Who should I contact if I have any questions or concerns?

If you have any concerns you should contact the Syncope and PoTS Service on the following number:

• 0114 226 9184

Please be aware that this is an answerphone service. Messages are checked once a day by our nurse specialists and responded to in priority order.