

MUSCLE SPASMS†

Generic & Class	Brand & Company	Strength		Formulations†	Usual Adult Dose
α2-ADRENERGIC AGONIST					
Tizanidine HCl	ZANAFLEX TABLETS (Acorda Therapeutics)	4mg	℞	scored tabs	Initially: usually 4mg, may increase by 2–4mg as needed every 6–8 hrs to a max of 3 doses in 24hrs; max 12mg/dose and 36mg/day. Renal impairment (CrCl <25mL/min): reduce dose. May sprinkle contents of capsules on applesauce (may affect absorption). Tabs and caps not bioequivalent under fed conditions.
	ZANAFLEX CAPSULES (Acorda Therapeutics)	2mg, 4mg, 6mg	℞	caps	
MUSCLE RELAXANT (CENTRAL)					
Orphenadrine citrate	NORFLEX (Graceway)	100mg	℞	sust-rel tabs	100mg twice daily (AM and PM).
	NORFLEX INJECTION (Graceway)	60mg/2mL	℞	inj*	60mg IM or IV every 12 hrs.
ANTICHOLINERGIC MUSCLE RELAXANT (CENTRAL) + SALICYLATE					
Orphenadrine citrate	(various)	25mg	℞	tabs	1–2 tabs 3–4 times daily.
Aspirin		385mg			
Caffeine		30mg			
Orphenadrine citrate	(various)	50mg	℞	scored tabs	½–1 tab 3–4 times daily; max 4 tabs daily.
Aspirin		770mg			
Caffeine		60mg			
BENZODIAZEPINE					
Diazepam	 DIAZEPAM ORAL SOLUTION (Roxane)	5mg/5mL	CIV	soln	2–10mg 3–4 times daily. Elderly, debilitated: initially 2–2.5mg 1–2 times daily; increase gradually.
	Diazepam injection (various)	5mg/mL	CIV	inj ^Δ	Initially 5–10mg slow IV (5mg/min) or IM. May repeat after 3–4 hours. Tetanus: may need larger dose. Do not use small vein.
	DIAZEPAM INTENSOL (Roxane)	5mg/mL	CIV	concentrated soln**	2–10mg 3–4 times daily. Elderly, debilitated: initially 2–2.5mg 1–2 times daily; increase gradually. Intensol: mix with liquid or semi-solid food.
	VALIUM (Roche)	2mg, 5mg, 10mg	CIV	scored tabs	2–10mg 3–4 times daily. Elderly, debilitated: initially 2–2.5mg 1–2 times daily; increase gradually.
CHOLINESTERASE INHIBITOR					
Pyridostigmine bromide	MESTINON (Valeant)	60mg	℞	scored tabs	Usually 600mg daily in divided doses.
	MESTINON SYRUP (Valeant)	60mg/5mL	℞	syrup ^Δ	
	MESTINON TIMESPAN (Valeant)	180mg	℞	sust-rel scored tabs	Usually 1–3 tabs 1–2 times daily.
MUSCLE RELAXANT (CENTRAL)					
Cyclobenzaprine HCl	AMRIX (Cephalon)	15mg, 30mg	℞	ext-rel caps	Take at same time each day. 15mg once daily; may increase to 30mg/day given once daily. Max 2–3 weeks.
Baclofen	(various)	10mg, 20mg	℞	scored tabs	5mg 3 times daily. Increase in increments of 5mg 3 times daily every 3 days if needed; max 80mg daily.
Cyclobenzaprine HCl	FEXMID (Victory Pharma)	7.5mg	℞	tabs	≥15yrs: initially 5mg 3 times daily; may increase to 7.5mg or 10mg 3 times daily. Max 2–3 weeks. <15yrs: not recommended.
	FLEXERIL (McNeil Consumer & Specialty)	5mg, 10mg	℞	tabs	≥15yrs: initially 5mg 3 times daily; may increase to 10mg 3 times daily. Max 2–3 weeks. <15yrs: not recommended.
Chlorzoxazone	PARAFON FORTE DSC (Ortho-McNeil)	500mg	℞	scored caplets	500mg 4 times daily; max 750mg 4 times daily.
Methocarbamol	ROBAXIN (UCB)	500mg	℞	tabs	≥16yrs: initially 1.5g 4 times daily for 2–3 days. Maintenance: 4g daily in divided doses. <16yrs: not recommended.
	ROBAXIN-750 (UCB)	750mg	℞	tabs	
Metaxalone	SKELAXIN (King)	800mg	℞	scored tabs	800mg 34 times daily. <12yrs: not recommended.
Carisoprodol	SOMA (Meda)	350mg	℞	tabs	≥16yrs: 250mg–350mg 3 times daily and at bedtime. Max 2–3 weeks. <16yrs: not recommended.
	SOMA 250 (Meda)	250mg	℞	tabs	
MUSCLE RELAXANT (LOCAL)					
Dantrolene sodium	DANTRIUM (Proctor & Gamble)	25mg, 50mg, 100mg	℞	caps	25mg once daily for 7 days, then 25mg 3 times daily for 7 days, then 50mg 3 times daily for 7 days, then 100mg 3 times daily; max 100mg 4 times daily.
MUSCLE RELAXANT (CENTRAL) + SALICYLATE					
Carisoprodol	(various)	200mg	℞	tabs	1–2 tabs 4 times daily.
Aspirin		325mg			
MUSCLE RELAXANT (CENTRAL) + SALICYLATE + OPIOID					
Carisoprodol	(various)	200mg	CIII	tabs*	1–2 tabs 4 times daily.
Aspirin		325mg			
Codeine phosphate		16mg			

†caps = capsules; tabs = tablets; ext-rel = extended-release; inj = injection; soln = solution; sust-rel = sustained-release; amp = ampule
 *Contains sulfites. **Contains alcohol 19%. ^ΔContains propylene glycol 40%, ethyl and benzyl alcohol. ^ΔContains alcohol 5%.

†Not an inclusive list. Please see drug monographs or visit www.eMPR.com.

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