Medication Audit Criteria and Guidelines

Buspirone (Buspar® [DSC])

PEFC Approved: July 2023

Indications

If a medication is prescribed for an off-label indication, documentation in the patient chart is recommended.

Label:

- Generalized anxiety disorder

Off Label:

- Major depressive disorder (augmentation)

Black Box Warning

None

Contraindications

- Hypersensitivity to buspirone hydrochloride
- Concomitant use of buspirone with a monoamine oxidase inhibitor (MAOI) has led to some reports of serotonin syndrome and/or elevated blood pressure. It is recommended that buspirone not be used concomitantly with a MOAI.

Warnings and Precautions

- CNS depression
- Concomitant use of buspirone with strong CYP3A4 inhibitors may increase serum concentration of buspirone, leading to increased risk of side effects or toxicity.
- Congestive heart failure, myocardial infarction, and cerebrovascular accident have been reported with buspirone in rare instances (<0.1%).
- Possible concerns related to buspirone's binding to dopamine receptors
  - Drug-induced movement disorders, including dyskinesia, akathisia, dystonia (usually focal), myoclonus, and parkinsonism associated with buspirone have been seen in rare instances
- Potential for withdrawal reactions in sedative/hypnotic/anxiolytic drug-dependent patients

  - Buspirone will not block the withdrawal syndrome seen with cessation of sedative/hypnotic/anxiolytic drugs in patients who are dependent on such medications. Concomitant CNS-depressant drugs should be withdrawn gradually if buspirone is initiated to replace any of these agents.
- Serotonin syndrome

Adverse Reactions

Side Effects Which Require Medical Attention

- Dizziness
- Drowsiness
- Headache
- Nausea
- Nervousness

Drug Interactions of Major Significance

See: Contraindications

See: Indiana Univ Drug Interaction Table

See: Lexicomp, Micromedex for more information

Special Populations

- Pediatrics/Adolescents
  - Not considered in the Psychotropic Medication Utilization Parameters for Children and Youth in Texas Public Behavioral Health (6th Version).
- Geriatric
  - No dosage adjustments needed.
- Renal
  - Use with caution in patients with mild to moderate renal impairment, as plasma levels may be increased and half-life may be prolonged. No specific dosage adjustments provided by manufacturer.
  - Use is not recommended in patients with severe renal impairment.
- Hepatic
  - Use with caution in patients with mild to moderate hepatic impairment, as plasma levels may be increased and half-life may be prolonged. No specific dosage adjustments provided by manufacturer.
  - Use is not recommended in patients with severe hepatic impairment.

- Hemodialysis
  - Unlikely to be significantly dialyzable. No specific dose adjustment recommended. Mean plasma concentrations of buspirone and its active metabolite were significantly elevated compared to subjects with normal kidney function. Start with low dose and titrate cautiously based on response and tolerability.
- Pregnancy and Breastfeeding
  - Review product-specific labeling. Consider risks/benefits in reviewing medication-specific labeling.

Patient Monitoring Parameters

Baseline Tests:

- Pregnancy test (females)

Ongoing Tests:

- Pregnancy test (females) as clinically indicated

Dosing

- See HHSC Psychiatric Drug Formulary for dosage guidelines.
- If a medication is prescribed at dosages in excess of the Psychotropic Dosage Guidelines found in the HHS Psychiatric Drug Formulary, documentation in the patient chart is recommended.