

Beta-Blocker

Patient Information

As part of your surgical care, we will be giving you a drug called a beta-blocker. A number of studies have shown that, for selected patients, giving a beta-blocker before, during and after surgery is very helpful in protecting the heart during surgery and for several months afterwards. In fact, one study shows that this benefit lasts for up to two years following the surgery. Beta-blockers reduce the risks of chest pain, heart attack or death.

Who should take this medicine?

Any patient with known coronary artery disease or risk factors for heart disease. Your surgeon or the hospital staff at Swedish will determine if you would benefit from taking this medicine.

What is the medicine?

Beta-blockers help treat high blood pressure, congestive heart failure following a heart attack, and other conditions. There are many different beta-blocking drugs. The most common one we use is Metoprolol (also known as Lopressor). You may be given a different one; however, the heart protection benefits are the same with all the different beta-blockers.

When and how do I take this?

Your surgeon will decide when to have you start this medicine. Some patients will start the beta-blocker medicine one week prior to surgery, while others start on the day of surgery. If your doctor wants you to start it before surgery, he or she will give you a prescription for this medicine. You should fill it and begin taking it according to the directions on the container.



In most cases, you will receive Metoprolol 50 mgs and you should take one tablet in the morning and one tablet in the evening. You should do this for a week prior to your surgery. **You should continue to take this tablet on the morning of your surgery with a small sip of water.**

When you arrive at the hospital on the day of your surgery, we will continue to give you this medicine. We will give you the medicine through an IV or by mouth throughout your hospital stay. When you are discharged from the hospital, we will give you a prescription to continue this drug at home for one month. You should fill this and continue taking this medicine for a month following surgery. This will give you the most protection for your heart.

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SWEDISH

What if I am already taking a beta-blocker?

In most cases, you should continue taking your current medicine. You do not need to add another medicine.

What are the common side effects of these medicines?

The intended effect is to slow your heart rate. Generally, the side effects from this group of drugs are minimal. You may notice some mild fatigue. Notify your doctor if any of the following effects become bothersome:

- Dizziness
- Fatigue
- Abdominal pain
- Heartburn
- Sexual problems

Notify your physician immediately if you experience:

- Sore throat
- Rash
- Fever
- Throat spasms
- Swelling in your limbs
- Problems breathing

Who should not take beta-blockers?

Beta-blockers are usually avoided in patients with bronchospastic disorders (chronic bronchitis, emphysema, asthma, and chronic obstructive lung disease) as they may decrease the effectiveness of drugs that open up the airways, such as albuterol. Beta-blockers also may mask the signs of low blood sugar.

**If you have ANY questions,
ask your pharmacist,
doctor or surgeon.**



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