This information was up to date at the time of release to the Heads of Midwifery.
The editorial board does not accept liability for any errors or omissions following its subsequent publication.
Updating arrangements for the formulary should be decided upon and implemented at a local level.

# Co-magaldrox (Mucogel®)

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| **Legal status** (GSL, P or POM on exemption list, or PGD) | GSL - midwife may supply |
| **Patient group** | Pregnant women. |
| **Clinical indication** | Heartburn which has not responded to simple lifestyle changes. |
| **Pharmacology** (Onset and duration of action where appropriate) | Co-magaldrox is a mixture of two antacids, aluminium hydroxide which is slow acting and magnesium hydroxide which is faster acting. These antacids work together to neutralise excess acid and protect the stomach lining from irritation and should have a neutral effect on the colon. They also help relieve the discomfort and symptoms caused by excessive acid such as heartburn.<br><br>This low sodium- containing antacid is a suitable choice in gestational hypertension and pre-eclampsia.<br><br>Onset of action usually occurs in about 15 minutes and effects last for 2-4 hours. |
| **Pharmaceutical form, strength, route of administration** | Mucogel® is a sugar-free, low sodium, mint flavoured suspension containing in each 5ml:<br>Aluminium hydroxide gel BP 220 mg<br>Magnesium hydroxide BP 195 mg<br><br>For oral administration. |
| **Dose, frequency and maximum number of doses or period of time for administration or supply** | 10-20 ml three times daily 20 minutes to an hour after meals and at bedtime, or as required.<br>Dose in accordance with local guidelines - usually 20 ml dose will be required.<br><br>Throughout pregnancy. |
| **Contra-indications/exclusion criteria** | ▪ known hypersensitivity to any component of the medicine<br>▪ severe renal impairment |
| **Cautions and action that will be taken if a caution applies** | ▪ during labour (risk of aspiration of a particulate antacid)<br>▪ check for and document any allergies<br>▪ check and document past medical and drug history and current medication to ascertain potential for overdose<br>▪ if a caution applies consult with a doctor<br>▪ document consultation in maternity record |
| **Medicine interactions and action that will be taken if a patient is taking a medicine that may interact** | ▪ if there is a clinically significant drug interaction, consult with a doctor before administration or supply<br>▪ document consultation in maternity record<br>▪ refer to current BNF for latest information on interactions |

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| **Potential adverse reactions and side effects including actions to be taken if adverse medicine reaction is suspected** | ▪ *antacids should not be taken at the same time as other drugs as they may impair their absorption*<br>▪ *in obstetrics, the reduction in the absorption of oral iron may be clinically important - allow at least 2 hours between the administration of antacids and oral iron*<br>▪ *reduced absorption of certain drugs from the following groups: ACE inhibitors, antibacterials, antiepileptics, antifungals, antimalarials, antipsychotics, antivirals, bisphosphonates, bile acids, deflazacort, diflusinal, digoxin, dipyridamole, lansoprazole, levothyroxine, mycophenolate - consult BNF for most recent information*<br>▪ *antacids may damage enteric coatings of medicines, which prevent the dissolution in the stomach*<br>▪ *on labour* *Nil*<br>▪ *on the neonate* *Nil*<br>▪ *on breast feeding* *Nil*<br>▪ *if a serious adverse reaction is suspected please report to the MHRA Yellow Card Scheme http://yellowcard.mhra.gov.uk/* |
| **Overdose** | ▪ serious symptoms are unlikely following overdose but may include hyperrnagneseamia, and dehydration<br>▪ immediate assessment/treatment is essential - refer to medical staff<br>▪ manage in accordance with established treatment guidelines or see BNF overdose section<br>▪ for further advice contact National Poisons Centre 0344 892 0111 |
| **Action if patient declines** | ▪ refer to authorised prescriber or doctor<br>▪ document in maternity record |
| **Additional advice and information** | ▪ advise to contact midwife/GP if condition worsens or symptoms persist<br>▪ give the manufacturer's patient information leaflet to the woman |
| **Patient monitoring arrangements during and after treatment and follow-up required** | If response is inadequate consider alternative antacid. |
| **Particular storage requirements** | - |

**References**


1. Summary of Product Characteristics Mucogel ®. Text revision 7.11.2018 Accessed 23.12.2019 http://www.medicines.org.uk
2. http://www.bnf.org