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PSYCHIATRY

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PATIENT EDUCATION

Lofexidine

Lucemyra / Oral tablets

A guide for adults taking lofexidine.
Follow the directions on your prescription and your provider's recommendations.

NON-OPIOID MEDICINE | LOW BLOOD PRESSURE? HOLD THE DOSE AND CALL

Formulations: Tablets are usually taken in divided doses during a course lasting up to 14 days. Kidney or liver impairment may require less medication, followed by a planned reduction.

What it is used for

Lofexidine reduces symptoms of opioid withdrawal during a short treatment course. It does not treat opioid use disorder over the long term or prevent relapse and overdose.

How it works

It activates alpha-2 receptors and reduces the surge of sympathetic signaling during withdrawal. The same action can lower blood pressure and slow the pulse.

What to expect over time

Relief may begin during the first day. The team adjusts the short course according to withdrawal symptoms and side effects while arranging ongoing care.

Taking your medication

- Follow the schedule and blood-pressure or pulse checks supplied by your provider.
- If faint, dizzy, or your readings are below the agreed limits, sit or lie down, hold the next dose, and contact the team.
- Do not double a missed dose or add tablets for persistent symptoms.
- Follow the planned taper, commonly over two to four days; abrupt stopping may raise blood pressure.

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LOFEXIDINE / 02

Side effects and safety

Possible side effects

- Dizziness or low blood pressure
- Slow pulse, sleepiness, or fatigue
- Dry mouth
- Fainting

Keeping track of treatment

Some side effects resolve with time; others may require a change of medication. Discuss persistent or bothersome side effects with your provider.

Blood pressure and pulse need monitoring. An ECG may be needed with heart-rhythm risks, kidney or liver impairment, or interacting medications.

If you take too much

For a suspected overdose, call Poison Control at **1-800-222-1222** immediately, even if you feel well. Call 911 for a seizure, collapse, trouble breathing, or inability to wake.

Before you start

Discuss fainting, slow pulse, heart disease, QT prolongation, kidney or liver disease, and all opioid or sedative use.

Discuss pregnancy, pregnancy plans, and breastfeeding with your provider. Treatment decisions should consider both the medication and the condition being treated.

Medicines and interactions

Review all your medications with your provider, including over-the-counter medicines and supplements. Have new medications checked before taking them.

Methadone and other QT-prolonging medicines can add rhythm risk. Blood-pressure medicines may worsen hypotension.

Alcohol, benzodiazepines, opioids, and other sedatives increase impairment. CYP2D6 inhibitors can raise exposure.

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Living with your treatment

When to get help

Emergency symptoms. Call 911 for collapse, chest pain, an irregular heartbeat with faintness, or severe breathing difficulty.

Prompt medical advice. Report persistent dizziness, very low blood pressure or pulse, or inability to keep fluids down. Contact your team if withdrawal remains difficult to manage.

If you feel unsafe or have thoughts of self-harm, call 911 or go to an emergency department.

Your questions answered

Does finishing withdrawal treatment cure opioid use disorder?
No. Ongoing medication and recovery care may still be needed. Tolerance falls after stopping opioids, making a return to a previous dose especially dangerous.

Should I have an overdose rescue medicine?
Discuss one with your provider and make sure someone knows how to use it and call 911.

Everyday tips

Arrange follow-up care before the withdrawal course ends.

Avoid dehydration and stand up slowly.

Storage and safety

Keep medication in its labeled container, away from excess heat and moisture and out of reach of children and pets. Do not share it. Ask a pharmacy about disposal of unused medication.

Sources

DailyMed: Lucemyra prescribing information

Educational handout; does not replace your prescription or provider's recommendations.