



**Prior Authorization Approval Criteria**  
*Department of Pharmacy Services*

**Generic Name:** Methscopolamine

**Brand Name:** Pamine / Pamine Forte

**FDA Approved Uses:** Adjunctive therapy for the treatment of peptic ulcer disease\*.

**Medication Class:** Anticholinergic agent

**Usual Doses:** 2.5mg one-half hour before meals and 2.5 to 5 mg at bedtime to start.  
Maximum daily dose is 30 mg daily.

**Duration of Therapy:** Indefinite

**Criteria for Use:** *(bullet points below are all inclusive unless otherwise noted)*

- Clinically documented peptic ulcer disease.
- Failed/ Intolerant to hyoscamine.

**Contraindications:**

- Glaucoma
- obstructive uropathy
- obstructive disease of the GI tract.
- paralytic ileus
- intestinal atony of the elderly or debilitated patient.
- unstable cardiovascular status in acute hemorrhage
- severe ulcerative colitis
- toxic megacolon complicating ulcerative colitis
- myasthenia gravis
- hypersensitivity to methscopolamine bromide

**Not approved if:**

- The patient does not meet the above stated guidelines for approval.
- The patient has any contraindications to the use of methscopolamine.

\*Methscopolamine bromide has not been shown to be effective in contributing to the healing of peptic ulcer, decreasing the rate of recurrence or preventing complications.



P&T Approval: \_\_\_\_\_ Date: \_\_\_\_\_