

**Table 1 Recommended dosages for medications used in the prevention and treatment of altitude illness**

<i>Medication</i>	<i>Indication</i>	<i>Route</i>	<i>Dosage</i>
Acetazolamide	AMS, HACE prevention	Oral	125 mg every 12 h <sup>a</sup> Pediatrics: 2.5 mg·kg <sup>-1</sup> every 12 h
	AMS treatment <sup>b</sup>	Oral	250 mg every 12 h Pediatrics: 2.5 mg·kg <sup>-1</sup> every 12 h (maximum: 125 mg per dose)
Dexamethasone	AMS, HACE prevention	Oral	2 mg every 6 h or 4 mg every 12 h <sup>a</sup> Pediatrics: Should not be used for prophylaxis
	AMS, HACE treatment	Oral, IV, IM	AMS: 4 mg every 6 h HACE: 8 mg once, then 4 mg every 6 h Pediatrics: 0.15 mg·kg <sup>-1</sup> ·dose <sup>-1</sup> every 6 h (Maximum: 4 mg per dose)
Ibuprofen	AMS prevention	Oral	600 mg every 8 h
Nifedipine	HAPE prevention	Oral	30 mg ER version, every 12 h or 20 mg ER version every 8 h <sup>c</sup>
	HAPE treatment	Oral	30 mg ER version, every 12 h or 20 mg ER version every 8 h
Tadalafil	HAPE prevention	Oral	10 mg every 12 h <sup>c</sup>
Sildenafil	HAPE prevention	Oral	50 mg every 8 h <sup>c</sup>

**AMS, acute mountain sickness; HACE, high altitude cerebral edema; IM, intramuscularly; ER, extended**

release; HAPE, high altitude pulmonary edema.

**a** For individuals ascending to and remaining at a given elevation, after arrival at the target elevation, the medication should be continued for 2 d in individuals adhering to the recommended ascent rate and 2 to 4 d in individuals ascending faster than recommended rates. Individuals who ascend to a target elevation and immediately descend can stop the medication once descent is initiated.

**b** Acetazolamide can also be used at this dose as an *adjunct* to dexamethasone in HACE treatment, but dexamethasone remains the primary treatment for HACE.

**c** For individuals ascending to and remaining at a given elevation, after arrival at the target elevation, the medication should be continued for 4 d in individuals adhering to the recommended ascent rate and 4 to 7 d in individuals ascending faster than recommended rates. Individuals who ascend to a target elevation and immediately descend can stop the medication once descent is initiated.