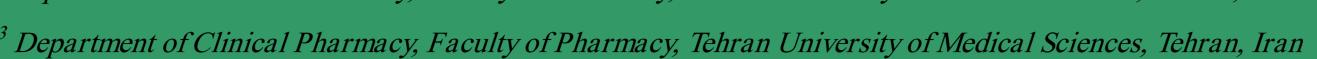
Adverse Drug Reactions Leading To Ocular Surface Disease Clinic Visits At An Eye Hospital: A Brief Report

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An adverse drug event (ADE) is a noxious or harmful effect of medications that cause a huge burden on the health system. It is proven that every medication, beside its useful effects, may have some adverse consequences. It is estimated that the incidence of ADEs is approximately 1.7 to 25.1% in hospitals and they also results in patient admission with a frequency of 2.0 to 21.4%¹.

Knowledge improvement regarding ADEs is essential to reduce the prevalence, morbidity, and burden of ADEs through early detection of adverse reactions².

Many drugs, such as:

Topiramate, Quetiapine, Retinoids, especially Isotretinoin, Amiodarone, Tamoxifen, Chloroquine and Hydroxychloroquine and medications used for erectile dysfunction are known for their ocular toxicity³.



Drug induced ocular adverse events are the second common reason for official complaints against ophthalmologist⁴.

This study was designed to collect the data of the pattern of ocular adverse events and the potential drugs in order to improve patient's safety.

- ♦ Observational, prospective study
- ◆ Ocular surface clinic of a university affiliated tertiary, eye hospital
- ♦8.00 a.m. and 1.00 p.m. during 15 days
- ◆ Demographic data, chief complaint and present illness, past medical history, and drug history of the patients were reviewed by a pharmacist.
- ◆An ophthalmologist and a pharmacist reviewed the diagnosis to ensure it was an ADE related problem.
- ♦ National yellow card
- ◆Following patients for at least two weeks after discharge to evaluate the outcome.

objectives

CONCLUSION

- * The detection of ADRs is very important. Ocular ADRs may be frequent, specific, serious or even cause irreversible blindness or can occur as a result of active ingredients or preservatives in ophthalmic solutions.
- * The incidence of ophthalmic ADR is low but because of their importance, increasing the general awareness of clinicians and patients regarding ophthalmic ADRs would go a long way towards preventing and Sportsom identifying these reactions.

preduot

- ♦ Of the 571 patient visits, **20** (3.5%, 95% CI: 2.3 to 7.3%) were drug related.
- ◆There were 6 males 30% and 14 females 70% (P=0.063).
- **♦** Corticosteroids
- ♦ Oral route
- **♦ Posterior Subcapsular Cataract, Dry eye.**
- ◆ Only **1.5%** of the ADRs were **preventable**.
- ◆ Accessing the **seriousness**, the rate was 9 out of 20 ADRs (4.5%).

Data Analysis with SPSS

- ◆ Causality WHO criteria
- ♦ Preventability Schumock and Thornton scale
- ♦ Seriousness WHO



REPORT OF SUSPECTION COMMISSION ON HUMAN MEDICIN It's easy to report online: mh	ra.gov.uk/ye	llowcard or	via the app	Makir	ng medicine	s safer
If you suspect an adverse reaction this Yellow Card. See 'Adverse rea yellowcard, or see the back of this	actions to drug is form for guid	s' section in tance. Do not	the British Nation be put off repor	nal Formulary (BN ting because som	F), visit mhra.g ne details are no	ov.uk/ ot known.
PATIENT DETAILS Patient In						
Age (at time of reaction):	Identifica	ation number	(e.g. Your Practi	ce or Hospital He	it):	
SUSPECTED DRUG(S)/VAC	CINE(S)					
Drug/Vaccine (Brand if known)	Batch	Route	Dosage	Date started	Date stopped	Prescribed
SUSPECTED REACTION(S)			on(s) and any trea ages if necessar			Outcome Recovered Recovering Continuing Other
Date reaction(s) started:		_ Date reacti	on(s) stopped: _			
Do you consider the reaction(s) to If yes, please indicate why the rea			erious (please tick	all that apply):		
Patient died due to reaction Life threatening Congenital abnormality	☐ Involved	persistent or	inpatient hospita significant disabi , please give deta	lity or incapacity		
Do you consider that the suspect		C. T. C.				
Did the patient take any other me If yes, please give the following in Drug/Vaccine (Brand if known)			ntary remedies in Dosage	the last 3 months Date started		
Additional relevant information about any medication error (e.g. a medicine during pregnancy plea previous pregnancies, ultrasound	errors in prescri ase state all oth	ption, dosing er drugs take	, dispensing or a en during pregnar	dministration). For	r reactions relat	ing to use of
Please list any medicines obtain	ned from the i	nternet:				
REPORTER DETAILS Name and Professional Address:		CLINICIAN (if not the reporter) Name and Professional Address:				
			Email:	Tel No		
Postcode: Tel No:_ Email:						
			Speciality: _			

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