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

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Background/Introduction: Drug side effects are responsible for a high mortality rate and impose an economical burden on patients and the health care system. Some of these reactions can lead to patient hospitalization or prolong the patient stay. It is estimated that the incidence of adverse drug reactions (ADRs) is approximately 1.7 to 25.1% in hospitals^(1,2). It seems that acute ADRs resulting in eye hospital visits do not have a high prevalence however ophthalmic drugs such as eye drops have also a potential for ocular ADRs^(3,4).

Objective/Aim: The aim of this study was to evaluate ADR resulting in ocular surface disease in clinic visits at tertiary-care eye hospital. The frequency of ocular surface disease clinic visits due to ADRs, the type of ADR, and the suspected drugs were also investigated.

Methods: In this study, In this study, In this study all patients admitted to ocular surface disease clinic between 8.00 a.m. and 1.00 p.m. during 15 days were included. The patients' eye disorders and drug history were evaluated by a pharmacist to detect ADRs. The ophthalmologist performed an eye examination and was then consulted to determine if there was a causal link between the medication and the observed side effects. The national yellow card was completed for each ADR. The data were coded and analyzed afterwards.

Results: 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 were the most commonly drug class that cause ophthalmic ADRs in this study. The majority of the ophthalmic ADRs occurred by oral route of administration of drugs. Posterior subcapsular cataract was the most common ADR, followed by dry eye. Only 1.5% of the ADRs were preventable. Assessing the seriousness, the rate was 9 out of 20 ADRs (4.5%).

Conclusion: Concise monitoring and proper diagnosis of ophthalmic ADRs may reduce ocular complications. It seems that the general population and clinicians should be educated and warned about the hazard of these kinds of ADRs.

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Disclosure of Interest: None Declared