

re:ACTION

No. 1 - July 1993

*An occasional bulletin from the
West Midlands Adverse Drug Reactions Service*

REPORTING TO CSM West Midlands

We welcome Yellow Card reports on all adverse reactions to new (–) drugs and on all serious or unusual reactions to well-established drugs.

Yellow Cards can be found in the BNF, MIMS, the ABPI Datasheet Compendium and in FP10 prescription pads. Further supplies can be obtained from CSM West Midlands.

Please send reports to

CSM West Midlands Freepost BIRMINGHAM B15 1BR.

No stamp is needed.

CLOSELY MONITORED - DRUGS - a reminder

Nearly seventy new drugs are closely monitored by the CSM, and are marked with a –. The June 1993 issue of Current Problems carries a full list. The newest are:

- acarbose (Glucobay®)
- trandolapril (Gopten®)
- risperidone (Risperdal®)

RECENT REPORTS

Listen to mother: ciprofloxacin and breast feeding

(J Ped Surg 1992; 27: 744-746)

"Mother's milk is often considered to be the paradigm of sustenance for the newborn...", but occasionally drugs in breast milk can have adverse effects on the baby. A breast-feeding mother took ciprofloxacin for 6 days, and her 2 month old daughter developed anorexia, fever and foul-smelling, green diarrhoea. A left hemicolectomy was required, and histology showed pseudomembranous colitis, a complication of treatment with many broad spectrum antibiotics, and which has a mortality of up to 20% in children. Ciprofloxacin is concentrated in breast milk, and poses a risk to the infant as well as the mother.

Angioedema with ACE-inhibitors

(Laryngoscope, 1993; 103: 10-12 and Ann Internal Med 1992; 117: 234-242)

ACE inhibitors cause angioedema in about 1 in 500 to 1 in 1000 patients treated, and may be more common in Afro-Caribbeans, and in patients with a predisposition to idiopathic angioedema. The clinical syndrome of swelling of the lips, tongue and neck, with stridor or wheeze, occurs within the first week of ACE inhibitor therapy in about 75% of cases, but can

occur many months after starting the drug.

Treatment of severe airway obstruction should include adrenaline, which can be given intramuscularly or by nebulizer; intravenous treatment is appropriate in the intensive care unit. An antihistamine such as chlorpheniramine, and hydrocortisone, can also help.

Six of the 36 cases reported in Laryngoscope needed tracheostomy, intubation or a nasal airway. Four reports of fatal angioedema with products containing captopril or enalapril have been sent to the CSM.

Patients who have suffered angioedema during treatment with one ACE inhibitor are at risk of recurrence if they are given ANY member of the ACE inhibitor group subsequently.

Shaky prescribing: confusion of drug names

(Neurology 1993; 43: 228)

Serious consequences can result when one drug is mistakenly prescribed for another. In this letter, the authors describe 4 patients with Parkinson's disease whose condition deteriorated after they had received trifluoperazine (Stelazine®) 5 mg twice daily in place of selegiline 5 mg twice daily.

The British National Formulary recommends that prescriptions should be written in capital letters. Confusion might also be reduced if prescribers used only approved names.

Keep taking the tablets?: withdrawal of selective serotonin reuptake inhibitors

(Adverse Drug Reaction Bull 1993; 160: 603-606 and Current Problems 1993; 19: 1)

These reviews suggest that it would be wise to withdraw SSRIs slowly at the end of a course of treatment. Abrupt withdrawal can cause sweating, nausea, insomnia, tremor and confusion. The CSM has received 220 reports of withdrawal reactions with SSRIs.

Watered down: hyponatraemia with selective serotonin reuptake inhibitors

(BMJ 1992; 305: 1332 and Am J Psy 1991; 148: 542-543)

Psychiatric symptoms can be induced or aggravated by drugs, including those used to treat psychiatric disease. A woman developed lethargy and unsteadiness, associated with hyponatraemia, after 2 weeks of treatment with paroxetine (Seroxat®). Other SSRIs have also been reported to cause hyponatraemia, and the CSM has received reports of this reaction associated with paroxetine (Seroxat®), fluoxetine (Prozac®), fluvoxamine (Faverin®) and sertraline (Lustral®).