



PP15

Clinical Profile and Treatment Outcomes of Amlodipine Poisoning at the Philippine General Hospital: A Ten-Year Retrospective Review from 2009 to 2019

John David L. Comandante, MD^{1,2}, Lynn Crisanta DR. Panganiban, MD²

¹Section of Toxicology, Department of Emergency, Prehospital and Disaster Medicine, Ospital ng Makati

²National Poisoning Management and Control Center, University of the Philippines Manila – Philippine General Hospital

Aim and objectives: to determine the clinical profile and treatment outcome of patients aged 10-90 years old with amlodipine poisoning admitted at the Philippine General Hospital from 2009 to 2019

Methodology:

A retrospective chart review of all amlodipine poisoning from 2009 to 2019 was performed from NPMCC records and medical charts. Demographic data, clinical data, management options and treatment outcomes were obtained. Data analyses through frequencies and percentages, means with standard deviations, including their 95% confidence intervals, and correlations using inferential statistics.

Results:

There were total of 51 patients admitted for amlodipine ingestion. It follows trimodal distribution with first peak at 0-5 years old through accidental exposures, and second and third peak at 16-25 years old and 41-50 years old with intentional ingestions. Majority of the admissions were female (73%), using immediate-release preparations of amlodipine (94%), with co-ingestions (65%), and using the maintenance of others (63%). The most common reported symptoms were nausea and vomiting (86%) and dizziness/lightheadedness (57%), while the most common reported signs were tachycardia (78%) and hypotension (37%). The mean total ingestion of amlodipine in mg/kg was 4.06 ± 3.55 . Majority of the cases had poisoning severity score of minor (47%) and moderate (37%) signs of toxicity. The most common management option used was multiple dose activated charcoal (55%), followed by calcium gluconate (37%) and fluid resuscitation (35%). There were no reported deaths and majority were discharged without complications (71%). Nine patients had complications (18%) with transient acute kidney injury (12%) and non-cardiogenic pulmonary edema (8%) as the most common. Those with amlodipine poisoning had reversal of symptoms after 2 hours and without complications or adverse drug events.



Conclusions:

We had documented the demographic and clinical profiles, treatment modalities and outcomes of patients admitted at PGH for amlodipine poisoning from 2009 to 2019. Patients admitted had good prognosis after combination of treatments without deaths reported.