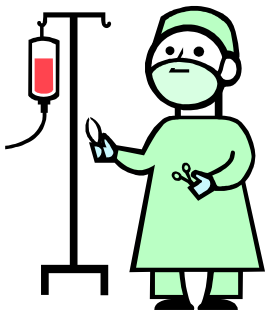
Update on management of Kawasaki Syndrome

There are many articles that describe the occurrence of thrombotic events in patients receiving immune globulin intravenous. In view of the serious nature of these reported thrombotic events, attention should be drawn to the product insert for Polygam® S/D, which includes a statement to this effect under the 'Precautions' section of the document. The precautionary statement is as follows:
There is clinical evidence of a possible association between Immune Globulin Intravenous (Human) (IGIV) administration and thrombotic events. The exact cause of this is unknown; therefore, caution should be exercised in the prescribing and infusion of IGIV in patients with a history of cardiovascular disease or thrombotic episodes.
From both the medical literature and our internal pharmacovigilance/quality assurance program, reports have been received describing serious thrombotic (vascular occlusive) events possibly associated with the infusion of immune globulin intravenous (IGIV). Analysis of these events indicates that the etiology is complex and the cause of this association is not clearly understood.



However, recent analysis of serious adverse events reported via pharmacovigilance, has identified rapid infusion of immune globulin intravenous as a possible risk factor. Grillo and co-workers also report on the use of rapid infusion of immune globulin intravenous in patients with neuromuscular disorders in the November 2001 issue of the journal Neurology, Vol. 57 (pages 1699 - 1701). Their abstract and discussion claim safety and convenience of this practice in their population of patients and the final sentence of their abstract states "Rapid infusion IVIg can be given safely and conveniently in many patients with neuromuscular disorders." While this is accurate for the majority of their patients, the authors report 89 adverse events in 341 rapid infusions in 50 patients, 3.5% of which were considered "major." This amounted to a "major" event in 11 out of 50 patients (22%).

It is these "major" events, and their frequency, which are of concern as these events included chest pain, myocardial infarction, congestive cardiac failure, severe headache requiring hospitalization, and pulmonary embolism. These are serious events almost certainly directly related to the rapid infusion protocol (reaching as high as 800 ml/hour) in what is essentially an at-risk population.

The American Red Cross is stressing that IGIV products should be administered only as stipulated by the package insert. They further recommend that all patients with thrombotic risk factors such as coronary artery disease, hypertension, cerebrovascular disease, diabetes mellitus, in whom IGIV is an appropriate therapeutic agent be carefully evaluated, and the infusion concentration for these patients should be no more than 5%. The infusion rate should be initiated no faster than 0.5 milliliter per kilogram body weight per hour and **increased slowly** only if well tolerated to a maximum rate of 4 milliliter per kilogram body weight per hour. In other words, the rate of infusion and percent of the solution concentration should be flexible and targeted to the safety of the patient rather than convenience.

It is strongly recommended that clinicians and other health care workers such as pharmacists and nurses who may be associated with the therapeutic administration of immune globulin intravenous, read and follow the product insert.

Please refer to the enclosed product direction insert for more complete prescribing information.

Reference: American Red Cross (Article of 26th March 2002)

Formation de Dermo-cosmétologie

UTIP Réunion organise une formation de dermo- cosmétologie à Maurice le 9 et 10 Novembre 2002. Cette formation se deroulera en deux soirées de 17hr00 à 19hr00.

Samedi 9: Les affections frontiers – "Dermatologie-cosmétologie"

Dimanche 10: Évolution des besoins et soins des différents états cutanés.

Conférencier:
Mr. Thierry Courtot
Docteur en pharmacie.
Consultant Expert en Dermatologie et Cosmétologie dans l'industrie pharmaceutique.
Specialisé en development produit et expertise clinique.
Chargé de formation au DU et DESS des CHU de Paris, Toulouse et Besançon.

Les conférences auront lieu au Paradis (Morne Brabant) et seront suivi d'un dîner. Les conférences seront gratuit mais le dîner sera payant.

Nous vous communiquerons plus d'amples renseignments ulterieurment.

Pharmacy Triva

Question: Where is the designation "P450" cytochrome P450 derived from?

Answer: The designation P450 is derived from the heme-containing enzyme absorbance of light at 450 nanometers in their reduced form.