



RETROSPECTIVE STUDY OF ALFUZOSIN 10mg PRESCRIPTIONS

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Background

Alfuzosin is indicated for the treatment of the symptoms of benign prostatic hyperplasia (BPH) and as adjunctive therapy with ureteral catheterization for acute urinary retention related to BPH. The alpha-blocking properties on the urinary tract are used for various indications not mentioned in the marketing authorization (MA) for men et women.

Purpose

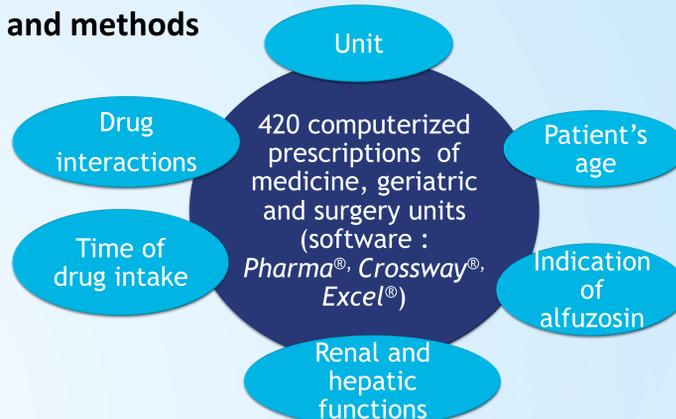
Retrospective study on alfuzosin 10mg prescriptions during one year

Quantify the proportion of off-label prescriptions

Identify the different off-label indications

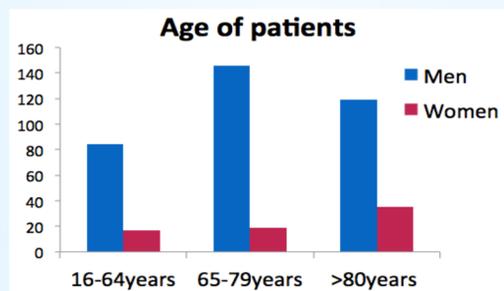
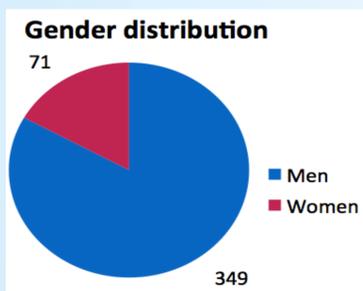
Determine if the good prescribing practices are observed

Material and methods



Results

A/ Population

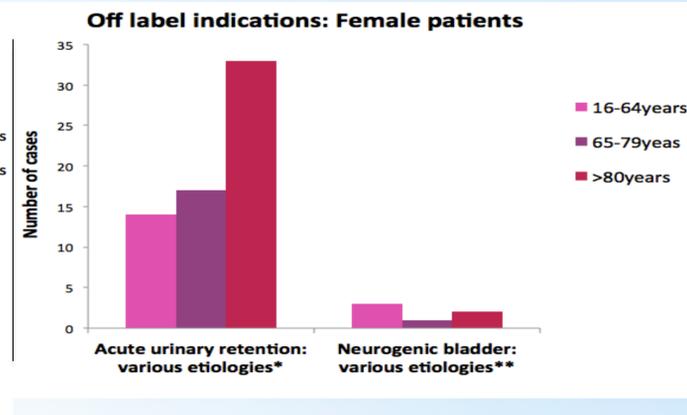
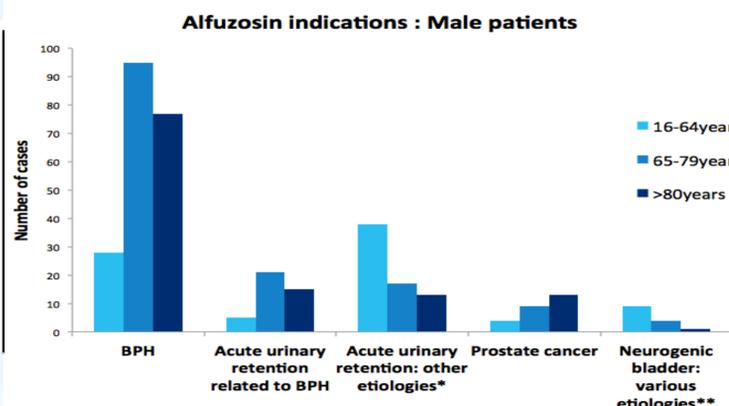
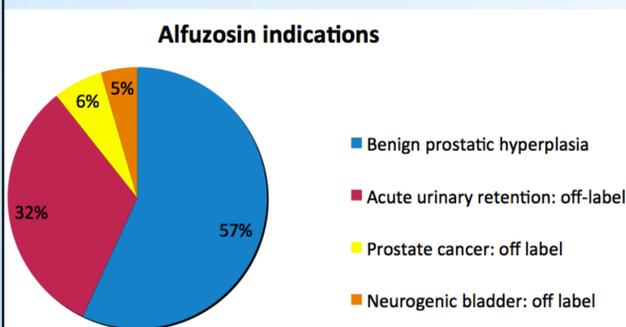


Renal and hepatic functions:

33 patients suffered from severe renal failure, nobody of severe hepatic failure which are contraindicated according to the summary of characteristics product.

B/ Indications

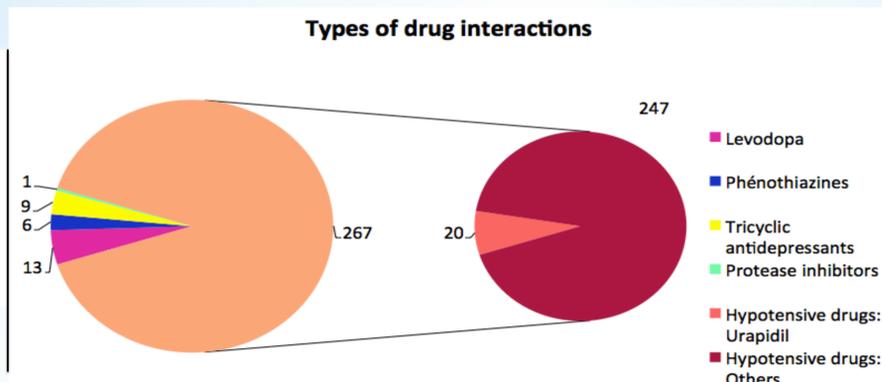
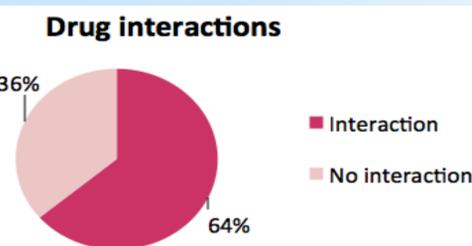
43% of off-label prescriptions including 17% concerning women



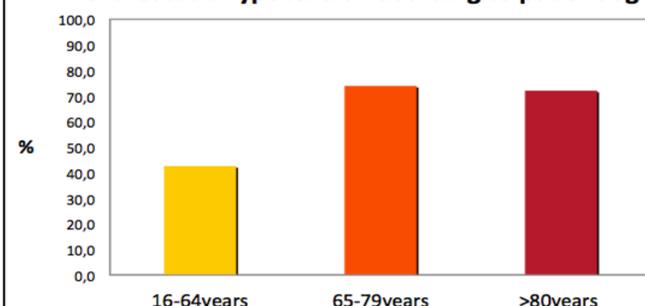
*acute urinary retention related to kidney stone, obstructive pyelonephritis, prostatitis, hypoactive bladder due to the use of a neuroleptic...

**neurogenic bladder in connection with stroke, Parkinson's disease, multiple sclerosis...

C/ Drug interactions



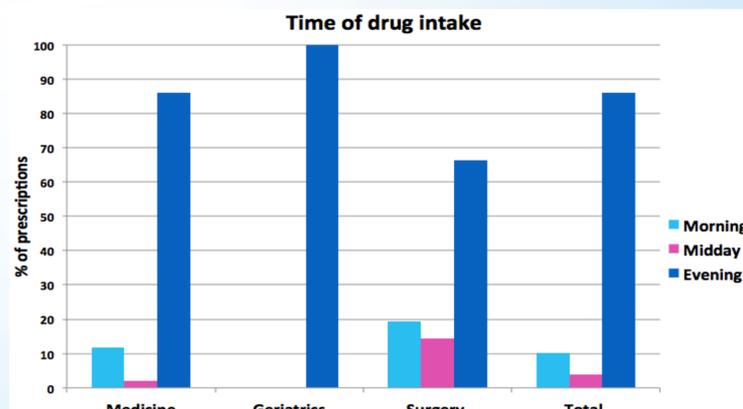
Drug interactions which increase the risk of orthostatic hypotension according to patient age



Alfuzosin is contraindicated with protease inhibitors, the others associations require precautions for use. Whatever the level of interaction, all are linked to an increase in the risk of orthostatic hypotension and therefore fall. Among these interactions, 85% concerned elderly people. A population particularly concerned by the risk of falling.

D/ Time of drug intake

The intake at bedtime and not in the morning is a factor allowing to reduce this risk of falls. More than 85% of prescriptions mentioned an evening administration including 100% in geriatric services.



Conclusion

Our study revealed various off-label indications, all developed in several scientific papers and underlined the issue of drug-related iatrogenia among the elderly. The improvement process of medicinal treatment has led us to write a summary (for medical and pharmacy interns) of the indications mentioned or not in the MA and the recommendations linked to the prescription. Another analysis will be done in one year.