



COMPOUNDING TACROLIMUS OPHTALMIC OINTMENT 0,02% IN THE TREATMENT OF INFLAMMATORY AND AUTOIMMUNE OPHTALMIC SYNDROMES: EFFECTIVENESS AND SAFETY ASSESSMENT

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BACKGROUND AND IMPORTANCE

Inflammatory/autoinmmune ophthalmic syndromes(IAOS) are often treated with **corticosteroids**. In some cases corticosteroids can be contraindicated, bad-tolerated, or ineffective.

This situation is really common in **pediatric patients**, who has a worse risks-benefits balance. **Ophtalmic tacrolimus**: evidence in IAOS based in studies with monitoring-duration reaching most 4 weeks.

AIM AND OBJECTIVES

Assess the **effectiveness, tolerance and safety** of compounded tacrolimus ophthalmic ointment 0,02% (CTOO) in the treatment of IAOS in pediatric and adult patients.

MATERIAL AND METHODS

Observational and retrospective research in pediatric and adult patients, recruited in our hospital with IAOS. **CTOO once-twice/day+adjuvant therapy(AT)** started in January,2016-April,2020; *during one year at least.* <u>Effectiveness:</u> hyperemia grade (none, mild, moderate, severe) at *3, 6, 12 months*, and grade of change noticed(GCN) at *1 and 12 months* as patient-report-outcome.

<u>Tolerance/safety</u>: at one week, and one year. It will be notified every discontinuation.

RESULTS





IN 2 EYES (SAME PATIENT) WERE DETECTED HERPESVIRUS INFECTIONS ASSOCIATED TO CTOO

CONCLUSION AND RELEVANCE

<u>Limitations</u>: lack of placebo group, same geographic zone, different adjuvant treatment. <u>Strengths</u>: balanced population, great prevalence of pediatric patients, and a long monitoring-duration. CTOO+AT have shown effectiveness and safety, based in the considered outcomes, in IAOS. It might be a good alternative in case of contraindication, bad tolerance, or inefficacy to corticosteroids, especially in Pediatrics.