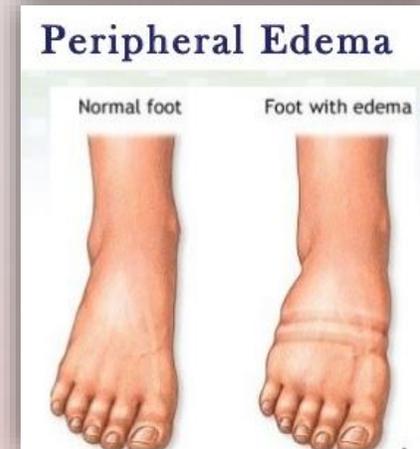


- ❑ Many drugs are responsible, through different mechanisms, for peripheral oedema.
- ❑ Drug-induced peripheral oedema is underrecognized and misdiagnosed, frequently leading to a **prescribing cascade**.<sup>(1)</sup>

Defined as the situation in which a first drug administered to a patient causes adverse event signs and symptoms, that are misinterpreted as a new condition, resulting in a new medication being prescribed.<sup>(2)</sup>



[Diagnosisbook.com]

MECHANISM <sup>(1)</sup>	PHARMACOLOGICAL GROUP <sup>(1)</sup>	DRUG <sup>(1)</sup>
<p><b>Renal oedema</b></p> <p>Drugs causing fluid overload increase capillary hydrostatic pressure which is transmitted to the capillary bed, predisposing to oedema formation.</p>	Nonsteroidal anti-inflammatory drugs (NSAIDs)	Nonselective, Coxibs
	Androgens	Danazol, Testosterone
	Aromatase inhibitors	Anastrozole, Letrozole, Exemestane
	Estrogens	Estradiol
	Gonadotropin-releasing hormone analogues	Gosereline, Leuprolide
	Growth hormone	Growth Hormone
	Corticosteroids	Fludrocortisone
	Endothelin receptor antagonists	Ambrisentan, Bosentan
	Opioids	Fentanyl, Hydromorphone, Morphine, Oxycodone, Tramadol
	$\alpha$ 1-adrenergic blockers	Doxazosin
	Potassium channel opener	Diazoxide
	Antihypertensive	Minoxidil, Hydralazine

# DRUG-INDUCED PERIPHERAL OEDEMA

MECHANISM <sup>(1)</sup>	PHARMACOLOGICAL GROUP <sup>(1)</sup>	DRUG <sup>(1)</sup>
<p><b><u>Vasodilatory oedema</u></b></p> <p>Drugs inducing preferential precapillary arteriolar vasodilatation increase capillary hydrostatic pressure, therefore increasing extravasation from the vascular space into the interstitium.</p>	Antihypertensive agents	CCBs, Minoxidil, Hydralazine
	Antiparkinsonian drugs	Dopaminergic Agonists, L-dopa, Monoamine oxidase inhibitors B.
	Antidepressant inhibiting 5-HT <sub>2</sub> receptors	Escitalopram, Mirtazapine, Paroxetine, Venlafaxine
	Antipsychotics with $\alpha$ <sub>1</sub> -adrenolytic effect and/or inhibitory effect on 5-HT <sub>2</sub> receptors	Clozapine, Olanzapine, Paliperidone, Quetiapine, Risperidone, Ziprasidone
	Skeletal muscle relaxant	Baclofen
	Endothelin receptors antagonists	Ambrisentan, Bosentan
<p><b><u>Lymphedema</u></b></p> <p>The pathophysiological mechanism of drug-induced lymphedema results from impaired lymphatic drainage that overcomes transcapillary filtration.</p>	Selective oestrogen receptor modulators (SERM)	Tamoxifen
	Taxanes	Paclitaxel, Docetaxel
	Mechanistic target of rapamycin kinase inhibitors	Everolimus, Sirolimus
	PI3K/AKT inhibitors	Alpelisib, Idelalisib
<p><b><u>Permeability oedema</u></b></p> <p>Drugs that can increase capillary permeability to proteins lead to the loss of protein-rich fluid from the intravascular to the interstitial space.</p>	Anticancer drugs	Gemcitabine, Clofarabine
	Cytokines	Interleukin-2, Granulocyte Colony Stimulating Factor
	Endothelin receptor antagonists	Ambrisentan
	Calcineurin inhibitors	Ciclosporin, Tacrolimus

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