

CASE REPORT

CEFTRIAZONE INDUCED ANAPHYLACTOID REACTIONS

Jilu Varghese^{1*}, Lovely Panavila¹, Binu Mathew¹, H. Doddayya¹, A.B.Patil², S.S.Antin²

¹Department of Pharmacy Practice, N.E.T Pharmacy College, Raichur, Karnataka, India

²Department of General Medicine, NMCH & RC, Raichur, Karnataka, India

Address for Correspondence: editorjohp@gmail.com

ABSTRACT

Ceftriaxone is a long acting, third generation, broad spectrum cephalosporin group of beta-lactam antibiotic. Intravenous administration of ceftriaxone is generally well tolerated and used for the treatment of serious bactericidal infections. Ceftriaxone is having the few adverse effects, among that hypersensitivity reactions are the most common one. We report here a 30-year-old female who experienced anaphylactoid reaction in the form of angioedema, glossitis and facial oedema within a few minutes of being administered ceftriaxone parenterally. Although anaphylactoid hypersensitivity reactions are rare adverse effects of ceftriaxone and other cephalosporins, clinicians should be aware of this allergic event to avoid possible adverse effects due to cross sensitivity among cephalosporins following the administration of any of the agents in this drug class.

Key Words: Angioedema, Cephalosporins, Ceftriaxone, Glossitis, Hypersensitivity reactions

INTRODUCTION:

Cephalosporins are currently one of the most widely prescribed antibiotics along with penicillins, because of their broad spectrum of activity on both gram-positive and gram-negative bacteria.¹ Ceftriaxone is a long acting, third generation, broad spectrum cephalosporin group of beta-lactam antibiotic. Ceftriaxone bactericidal action is through the inhibition of cell wall synthesis. Intravenous administration of ceftriaxone is generally well tolerated and used for the treatment of serious bactericidal infections. Ceftriaxone is having the few adverse effects, among that hypersensitivity reactions are the most common one.² The therapeutic use of cephalosporins has been increasing since the 1990s, and reports of hypersensitivity reactions to cephalosporins are also increasing. It has been reported that 15% of all severe drug allergies involved cephalosporins^{3, 4}. Immediate reactions occur in the first hour after administration and are manifested by urticaria, angioedema, anaphylactic shock, rhinitis, and bronchospasm⁵. Urticaria is the most common of the cutaneous reactions by cephalosporins (in 1–3% of cases), and there is a relatively low incidence of the other reactions, including anaphylactic shock⁶.

Drug allergies can be categorised into IgE-mediated (type I immediate type) and non-IgE mediated hypersensitivity reactions. IgE-mediated reactions

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