

Azithromycin prescribed despite risk for QTc prolongation

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(HealthDay)—Azithromycin is frequently prescribed to hospitalized



patients despite the presence of risk factors for QTc prolongation, according to a study published in the January issue of the *Journal of Hospital Medicine*.

In a <u>retrospective cohort study</u>, Rachael A. Lee, M.D., from the University of Alabama at Birmingham, and colleagues examined inpatient prescribing patterns and <u>risk factors</u> for QTc elongation. Data were included for 100 inpatients aged 19 years or older who were randomly selected from 1,610 patient encounters and who were administered at least one dose of azithromycin.

The researchers found that 79 percent of azithromycin use was empiric. Overall, 65 percent of patients received a baseline electrocardiogram before azithromycin prescription; 60 percent of these patients had borderline or abnormal QTc prolongation. Seventy-six percent of patients were prescribed one or more QTc-prolonging medication in addition to azithromycin, most often ondansetron, trazodone, and moxifloxacin; 19 percent received three or more QTc medications in addition to azithromycin.

"In a cohort of hospitalized patients, azithromycin was prescribed despite risk factors for QTc prolongation and administration of interacting medications," the authors write. "Selection of azithromycin by providers appears to be independent from these risk factors, and education and vigilance to drug-drug interactions may be useful in limiting cardiac events with prescribing azithromycin."

More information: Abstract

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