

Year: 2014 Volume: 1 Issue Number: 3

Doi Number: 10.5455/JNBS.1415349284

Article history:

Received 7 November 2014
Received in revised form 9 November 2014
Accepted 16 November 2014

SERTRALINE INDUCED ANGIOEDEMA

SERTRALINE BAĞLI ANJIOÖDEM

Alper Evrensel⁻¹, Barıs Önen Ünsalver¹, Mehmet Emin Ceylan¹, Gökce Cömert¹

To editor;

Selective serotonin reuptake inhibitors (SSRIs) are reliable drugs (Kostev et al, 2014). Only one angioedema case due to sertraline was reported (Dadic-Hero et al, 2011). In this case, angioedema has also developed with both sertraline and escitalopram (another SSRI). Crossallergic reactions might be seen in similar drugs.

Case

Sertraline (25 mg/day) treatment was started 51-yearold male patient with a diagnosis of depression. He called after 3 hours later first dose with complaints of swelling of the lips and tongue and sent his own photo. Thereupon dermatology consultation was requested. In dermatological examination angioedema (Quincke's edema) was diagnosed. Because it couldn't find another reason, sertraline treatment was terminated. Edema was decreased treatment with antihistaminic. After 2 weeks, sertraline (12.5 mg/day) was started again and 3-4 hours after taking the first dose of sertraline, he sent his own photo with complaints of the same symptoms. Sertraline treatment was terminated due to repeated angioedema. Amitriptyline (10 mg/day) treatment was started and angioedema didn't occur although the dose of it was increased to 100 mg/day.

In our case, angioedema was not developed with amitriptyline, a tricyclic antidepressant (TCA). It has been reported that amitriptyline might be used in the treatment of angioedema (Guarneri et al, 2014). It may be appropriate to plan a medication from a different group when allergic reactions occur.

Sincerely,

References

Dadic-Hero, E., Ruzic, K., Grahovac, T., Graovac, M., Palijan, T.Z., Sepic-Grahovac, D. (2011). Allergic reactions--outcome of sertraline and escitalopram treatments. Psychiatr Danub, 23, 120-122.

Guarneri, F., Guarneri, C., Marini, H.R. (2014). Amitriptyline and bromazepam in the treatment of vibratory angioedema: which role for neuroinflammation? Dermatol Ther. doi: 10.1111/dth.12150. (Epub ahead of print)

Kostev, K., Rex, J., Eith, T., Heilmaier, C. (2014). Which adverse effects influence the dropout rate in selective serotonin reuptake inhibitor (SSRI) treatment? Results for 50,824 patients. Ger Med Sci., 12, 1-8.

¹ Üsküdar University, NPIstanbul Hospital, Department of Psychiatry, Üsküdar University

^{*}Address for Correspondence: Assist. Prof. Dr.Alper Evrensel, Department of Psychology, Üsküdar University, Altunizade Mh. Haluk Türksoy Sk. No:14 İstanbul, Türkiye 34662. Tel: +902164002222 Fax: +902164741256 E-mail: alper.evrensel@uskudar.edu.tr