



**Fluoroquinolone Antibacterial Drugs: Drug Safety Communication-
Risk for possibly permanent nerve damage**

[Posted 08/15/2013]

FDA要求更新所有fluoroquinolone類抗菌藥物的仿單和用藥指示，新增一項嚴重周圍神經病變副作用的描述。這種嚴重神經傷害可能會在使用fluoroquinolone類抗菌藥物後立即出現，且可能為永久性。

背景

周邊神經病變的風險只在口服或注射fluoroquinolone時出現；塗抹於眼睛或耳朵的外用fluoroquinolone類抗菌藥物，其神經病變的風險尚未確認。

建議

確認若病人產生任何周邊神經病變的症狀，會立即與醫療人員聯繫。若病人產生任何周邊神經病變的症狀，除非使用的利益大於使用的風險，否則應建議停用fluoroquinolone，並轉換成另一種非fluoroquinolone的藥物。

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AUDIENCE: Family Practice, Infectious Disease, Pharmacy

ISSUE: FDA has required the drug labels and Medication Guides for all fluoroquinolone antibacterial drugs be updated to better describe the serious side effect of peripheral neuropathy. This serious nerve damage potentially caused by fluoroquinolones may occur soon after these drugs are taken and may be permanent.

BACKGROUND: The risk of peripheral neuropathy occurs only with fluoroquinolones that are taken by mouth or by injection. Approved fluoroquinolone drugs include levofloxacin (Levaquin), ciprofloxacin (Cipro), moxifloxacin (Avelox), norfloxacin (Noroxin), ofloxacin (Floxin), and gemifloxacin (Factive). The topical formulations of fluoroquinolones, applied to the ears or eyes, are not known to be associated with this risk.

RECOMMENDATION: Make sure your patients know to contact you if they develop symptoms of peripheral neuropathy. Make sure your patients receive the Medication Guide with every prescription. If a patient develops symptoms of peripheral neuropathy, the fluoroquinolone should be stopped, and the patient should be switched to another, non-fluoroquinolone antibacterial drug, unless the benefit of continued treatment with a fluoroquinolone outweighs the risk.