

Analysis of Reported Adverse Events Linked to Platelet Aggregation Inhibitors on a Descriptive Basis

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SUMMARY. The use of platelet aggregation inhibitors leads to several adverse events and may reduce adherence to antiplatelet regimens and some of the events can be severe and even life-threatening. The present study aimed to describe the reported adverse events that were associated with platelet aggregation inhibitors. This was a retrospective study that included a descriptive analysis of the reported Adverse Events associated with platelet aggregation inhibitors using the FDA Adverse Event Reporting System (FAERS). The total number of adverse events reports was 110232 reports for aspirin use, 216 reports for cangrelor, 4406 reports for cilostazol, 21566 reports for clopidogrel, 3701 reports for dipyridamole, 968 reports for prasugrel, 1132 reports for ticlopidine, and 22311 reports for ticagrelor use. The present study showed that the use of platelet aggregation inhibitors causes several adverse events and that the most reported adverse event was hemorrhage, particularly gastrointestinal hemorrhage, and its consequences such as anemia, hypotension, and dyspnea. Healthcare providers should educate their patients about the adverse events that are associated with the use of platelet aggregation inhibitors and how to manage these events. They should also ensure that the drug is prescribed, dispensed, and used appropriately.

RESUMEN. El uso de inhibidores de la agregación plaquetaria provoca varios eventos adversos y puede reducir la adherencia a los regímenes antiplaquetarios y algunos de los eventos pueden ser graves e incluso potencialmente mortales. El presente estudio tuvo como objetivo describir los eventos adversos informados que se asociaron con los inhibidores de la agregación plaquetaria. Este fue un estudio retrospectivo que incluyó un análisis descriptivo de los eventos adversos informados asociados con los inhibidores de la agregación plaquetaria utilizando el Sistema de notificación de eventos adversos (FAERS) de la FDA. El número total de informes de eventos adversos fue de 110232 informes para el uso de aspirina, 216 informes para cangrelor, 4406 informes para cilostazol, 21566 informes para clopidogrel, 3701 informes para dipiridamol, 968 informes para prasugrel, 1132 informes para ticlopidina y 22311 informes para uso de ticagrelor. El presente estudio mostró que el uso de inhibidores de la agregación plaquetaria provoca varios eventos adversos y que el evento adverso más informado fue la hemorragia, en particular la hemorragia gastrointestinal, y sus consecuencias como anemia, hipotensión y disnea. Los proveedores de atención médica deben educar a sus pacientes sobre los eventos adversos asociados con el uso de inhibidores de la agregación plaquetaria y cómo manejar estos eventos. También deben asegurarse de que el medicamento se prescriba, dispense y use de manera adecuada.

KEY WORDS: adverse events, FAERS, platelet aggregation inhibitors, reporting.

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