SCREENING PROTOCOL FOR CHLOROQUINE AND HYDROXYCHLOROQUINE TOXICITY
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Objective: To describe our screening protocol for diagnosis of early retinal dysfunction in patients with chloroquine (CQ) and hydroxychloroquine (HCQ) treatment.

Materials and Methods: Our screening protocol for antimalarial drug toxicity includes visual acuity and color vision testing and Humphrey 10-2. Perimetry is repeated if the patient has scotomas. Taking the risk factors into account we can decide to stop medication if persisting scotomas reveal. This cross sectional study investigates the efficiency of this protocol and risk factors for 241 patients using antimalarials.

Results: Mean age of patients was 48 years old and 225 of 241 patients were female. 169 of 241 (70,1%) were using CQ and 72 of 241 (29,9%) were using HCQ. 111 of 241 (46,1%) of patients were using over the secure dose. Mean drug usage was 30,6 months. 28 of 241 patients (11,6 %) antimalarial treatment was discontinued. Mean drug usage duration was 47,8 months in patients whose medication was stopped while in others 28.4 months.

Conclusion: Antimalarial drugs are widely used to treat inflammatory diseases, but can cause serious retinal toxicity. With the described protocol in this study no new drug toxicity cases occurred.