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## Side effect profile of drugs used in 100 heart transplant patients-An Indian study

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**Introduction:** We studied 100 patients undergoing heart transplant in our center between 2011-2016, for the drug side effect profile and clinical course.

Materials & Methods: Age range considered was 10-66 years. There were 74 males and 36 females. All patients were NYHA class 3 and above, 56 were in NYHA class 4 (Severe CHF) and 44 were in intermacs grade 3 and below. 12 were on preop ECMO support. PVR range was from 0.5 to 6.9 wood units (prior to injection milrinone or nitric oxide).

Results & Analysis: Just before heart transplant, all patients received 10-20 mg of basiliximab (dose as per body weight and general condition) single dose. Post op regimen was tacrolimus in 95, cyclosporine in 5, mycophenolate in all and wysolone for 6 months in 96 of 100 pts. Post operatively in 26 patients creatinin levels normalized by day five allowing initiation of tacrolimus. In other 10 patients tacrolimus could be started only at day 10 with no ill effects or rejection episodes. In all patients CD 25 level was checked on day three and second dose of basiliximab given only if CD 25 more than 3%. Post op no patient had sustained neutropenia. Only two patients needed therapy for azotemia with postoperative dialysis. Two patients died of severe RF and sepsis. 15 patients has new onset diarrhea 99% in the first year after transplant of whom four were found to have CMV antigen positive – these resolved with IV gancyclovir in three with one patient who died of severe disseminated CMV infection 6 months after transplant. One had clostridium difficile positive diarrhoe – treated with IV vancomycin plus metronidazole. In seven patients diarrhoe resolved with termination of mycophenolate and other 4 had E-coli or Salmonella diarrhea resolved with oral antibiotics 20 patients all over the age of 40 had sustained tremors which resolved in 35 with beta blockers or neuro vitamins. Five had severe tremors which resolved after changing from tacrolimus to cyclosporine. 25 patients had severe headache treated with tricyclic antidepressants and five needs change to cyclosporine. 10 patients had episodes of leucopenia, eight of which resolved after temporary stoppage of vangancyclovir and reduced dose of mycophenolate. 2 pats need SC G-CSF.

**Conclusion:** Overall mild side effects noted in 25 patients after heart transplant. Side effects like diarrhea, tremors and headache easily treated by clinical manipulation of drugs. One patient died of disseminated CMV infection, one from pneumonia and five of septic shock (first 15 days after transplant in three patients and three-six months in others).

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