

054

PERCENTAGE OF WEEKLY COUMADIN DOSE ADJUSTMENTS NEEDED IN PATIENTS RECEIVING CONCOMITANT CIPROFLOXACIN TREATMENT (B1), Richelle Nakata. VA San Diego Healthcare System, San Diego, CA (richelle.nakata@va.gov) IRB approval pending.

Numerous patients require life-long treatment with Coumadin to prevent blood clots. Because of the narrow therapeutic window associated with Coumadin treatment, such patients need to be closely monitored. Coumadin is susceptible to multiple drug interactions via CYP2C9, CYP1A2 and CYP3A4. The addition of Ciprofloxacin, an inhibitor of CYP1A2, to existing maintenance regimens of Coumadin have resulted in increased plasma levels of Coumadin as well as adverse events. Clinical investigations have failed to produce specific dosing recommendations to account for the drug interaction. We observed 164 cases of ciprofloxacin added to Coumadin treated patients in a one year period. The objective of this study is to determine if the weekly percentage dose decrease of 25-30% is an appropriate dose adjustment needed to maintain a therapeutic INR in patients receiving both medications. This is a retrospective study that will primarily be conducted through the computerized patient records system chart review. Patients will have INR and weekly dosages documented, at the initiation of a 14 day ciprofloxacin treatment, during treatment, and at discontinuation. The relationships will be compared via paired T-test and wilcoxon signed rank test where appropriate. Results will be presented.