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Prescribing patterns of vasoactive drugs in patients with acute esophageal variceal bleeding admitted in a tertiary care hospital – An ambispective study

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Abstract:

Background: Acute variceal bleeding, a medical emergency requires an immediate hospital admission and has an annual incidence rate of 5–15%. It is managed widely with vasoactive agents like terlipressin, octreotide, and somatostatin. The study is aimed to determine prescribing patterns of vasoactive agents used in the treatment of hospitalized patients with acute esophageal variceal bleeding (EVB).

Methods: We conducted a single center ambispective study from April 2021 to May 2022 in critically ill patients admitted with acute esophageal variceal bleeding. The patients were followed up for a total of 30 days or mortality whichever was later.

Results: Of a total of 153 patients included in the study, terlipressin 2mg was widely prescribed as loading dose (22.22%) and maintenance dose (36.601%). The efficacy parameters evaluated among different patients showed a 9.5% re-bleeding rate, 28.5% incidence of adverse effects and 7.8 ± 4.07 days of hospital stay in patients who received terlipressin. Re-look endoscopy rate 33.33% was seen in the somatostatin group. The total all-cause in-hospital mortality rate was 7.84%.

Conclusion: Resolution of EVB was seen with the administration of vasoactive drugs and the commonly prescribed drug was terlipressin. The use of vasoactive agents was associated with reduced risk of re-bleeding, hospital stay and mortality rate.

Key words: Esophageal variceal bleeding, prescribing patterns, vasoactive agents.

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