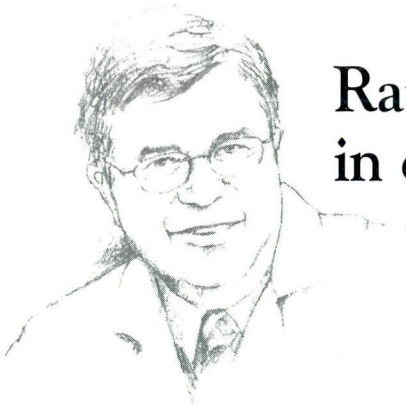

Rare but serious adverse effects in commonly used drugs

In this issue two authors discuss one of the thornier problems for physicians — rare but potentially serious side effects in the medications their patients commonly use.

In an article (page 208) on the Food and Drug Administration's recent warning on medications containing phenylpropanolamine (PPA),[1] Tracey Mersfelder, PharmD, outlines the findings of the Hemorrhagic Stroke Study. This case-control study found just 6 women who had been taking PPA-containing diet pills among 383 women who had suffered a hemorrhagic stroke, compared with 1 of 750 healthy women. Nevertheless, with billions of doses of PPA-containing over-the-counter diet drugs and cold remedies on store shelves and in medicine cabinets, the FDA deemed the small risk too great to take.

We think you will find the discussion of the study interesting. We also think that you will find Dr. Mersfelder's comprehensive tables of PPA-containing drugs useful. Although many of these drugs have been taken off store shelves, and their manufacuters have reformulated the products to remove PPA, we hope the lists will be useful in counseling patients about what may remain in their medicine cabinets.

In another article (page 189), Donald Vidt, MD, discusses the data to date on whether angiotensin II receptor blockers (ARBs) are a safe alternative for patients who get a cough or, more seriously, angioedema while taking angiotensin-converting enzyme inhibitors.[2] So far, ARBs appear to have fewer side effects, but the data regarding angioedema are not definitive.

We hope you find these articles and the other articles in this issue interesting and provocative.

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2. **Vidt DG.** Can angiotensin II receptor blockers be used in patients who have developed a cough or angioedema as a result of taking an ACE inhibitor? Cleve Clin J Med 2001; 68:189–190.