



19th September 2019

Circular 035/19

Re: Patient Safety Alert - Moxifloxacin

Dear Doctor,

Please find enclosed a patient safety alert issued by Prof Martin Cormican, HSE Clinical Lead Antimicrobial Resistance and Infection Control Division in respect of the use of moxifloxacin.

Your cooperation with this matter is appreciated.

Yours faithfully,

A handwritten signature in blue ink, appearing to read 'Shaun Flanagan'.

Shaun Flanagan
Primary Care Reimbursement and Eligibility



19TH SEPTEMBER 2019

PATIENT SAFETY ALERT - USE OF MOXIFLOXACIN WHEN APPROPRIATE ALTERNATIVE ANTIBACTERIAL AGENTS ARE AVAILABLE AND ARE LIKELY TO BE EFFECTIVE.

BACKGROUND

Fluoroquinolones are broad spectrum antibiotics. Those currently authorised in Ireland include: ciprofloxacin, levofloxacin, moxifloxacin and ofloxacin. All fluoroquinolones are associated with significant adverse effects. They are generally not appropriate for first line use in primary care. For guidance on antibiotic prescribing in primary care, please see www.antibioticprescribing.ie. Fluoroquinolones are valuable in specific settings where the benefit outweighs risk. Moxifloxacin featured twice in Irish Medicines Board (IMB), Drug Safety Newsletters. In February 2011, the IMB advised: *“Due to an increased risk of QT prolongation (in addition to the potential for other serious risks, i.e. serious hepatotoxicity), oral moxifloxacin should only be used when use of other antibacterial agents is inappropriate, or have failed.”* The Newsletter also noted that ciprofloxacin, levofloxacin and ofloxacin have lower potential to induce QT prolongation. The increased risk of hepatic adverse effects with moxifloxacin was first highlighted in September 2008 with advice to restrict its use. This alert is being circulated now because review of Primary Care Reimbursement Service (PCRS) data shows that oral moxifloxacin continues to be used in substantial quantities in primary care in Ireland. This is a cause for concern because circumstances in which moxifloxacin is preferable to other fluoroquinolones with a lower potential for QT prolongation are likely to be exceptionally rare in Primary Care.

The HSE Clinical Lead for Antimicrobial Resistance and Infection Control wishes to emphasise the need for all prescribers and all those dispensing prescriptions to be aware that even in those particular cases where a fluoroquinolone is necessary, moxifloxacin should only be used where other antibacterial agents, including the other fluoroquinolones, are “inappropriate or have failed”.

ACTIONS REQUIRED

By Whom: Prescribers, Pharmacists and Healthcare workers who administer medicines.

By When: For Immediate Action.

Ensure that all colleagues are aware that moxifloxacin should only be used when other antibacterial agents, including other fluoroquinolones, are inappropriate or have failed.

Do not prescribe moxifloxacin unless the conditions specified in the above are met.

Seek advice of a Consultant Microbiologist or Infectious Disease Physician regarding alternatives to moxifloxacin in circumstances where it is difficult to identify an alternative appropriate agent.

Contact person for queries in relation to this alert. Martin Cormican MCRN 011105. HSE Clinical Lead Antimicrobial Resistance and Infection Control. donna.mcnena@hse.ie.

**Prof Martin Cormican Microbiologist HSE Clinical Lead Antimicrobial Resistance and Infection Control Division
HPSC (AMRIC)
MCRN 01105**

Irish Medicines Board, Drug Safety Newsletter, Issue Number 40. February 2011.

<https://www.hpra.ie/docs/default-source/publications-forms/newsletters/drug-safety-newsletter-issue-no-40-february-2011.pdf?sfvrsn=2>

Irish Medicines Board, Drug Safety Newsletter, Issue Number 28. September 2008

<https://www.hpra.ie/docs/default-source/publications-forms/newsletters/drug-safety-newsletter-issue-no-28-september-2008.pdf?sfvrsn=2>