

## TRAMADOL - SAFE PRESCRIBING - CONSIDER THE RISKS!

- ▶ CAN CAUSE SEIZURES - FATALITIES HAVE BEEN REPORTED
- ▶ RISK OF SEROTONIN SYNDROME IN COMBINATION WITH OTHER MEDICINES
- ▶ COMBINATION WITH WARFARIN CAN INCREASE INR
- ▶ MILD OPIATE - HAS BEEN ASSOCIATED WITH DEPENDENCE/WITHDRAWAL SYNDROMES AND RESPIRATORY DEPRESSION
- ▶ ADVERSE EVENTS COMMON - OFTEN PSYCHIATRIC

**There have been many case reports of seizures in New Zealand with tramadol.** In a report of 12 cases of seizures associated with tramadol, risk factors included concurrent treatment with other medicines that lower the seizure threshold, e.g. antidepressants and antipsychotics. **Seizure activity is increased at doses of 400mg or more per day.** There have been reports of fatalities secondary to seizure activity.

**Tramadol has been associated with serotonin syndrome when used with agents that also act on serotonergic pathways;** symptoms can include agitation, ataxia, increased sweating, diarrhoea, fever, hyperreflexia, myoclonus, or shivering. Medicines that have been associated with this reaction include antidepressants such as the selective serotonin reuptake inhibitors (e.g. paroxetine, citalopram, fluoxetine), tricyclic antidepressants (e.g. amitriptyline), MAOI-type antidepressants and venlafaxine. There have been reports with carbamazepine and the newer antipsychotics, e.g. olanzapine.

**Other agents that have been reported to be associated with serotonin syndrome include:** St John's Wort, medicines for Parkinson's disease (e.g. amantadine, bromocriptine), illicit drugs (e.g. methamphetamine), anti-migraine agents (e.g. sumatriptan) and various other medicines, e.g. pethidine, bupropion and sibutramine. Caution is required when these are combined with tramadol.

**Another significant interaction associated with tramadol is an increased INR for some patients stabilised on warfarin.**

**The most common adverse effects associated with tramadol relate to its opiate actions.** These are primarily dizziness, nausea and somnolence. More serious opiate-related adverse events include respiratory depression and withdrawal symptoms; some patients have developed physical dependence. Tramadol appears to have a lower abuse potential when compared to other opiates, but **there have been reports of abuse and intoxication.** Like many CNS agents, the risk of fatal overdose is increased if tramadol is taken with other CNS depressants such as alcohol/benzodiazepines.

Most prescribers will be familiar with patients who feel strange and don't function well on tramadol; significant confusion and depersonalisation have been frequently reported. Elevated liver enzymes and rashes may occur, with a spectrum of other side effects affecting many organ systems. There have been rare reports of mood alterations including mania and auditory hallucinations. Like all opiate agents, tramadol can induce delirium in susceptible patients.

### KEY REFERENCE

CARM, *Cumulative Report of Adverse Reactions 2005 to 2008*, Centre for Adverse Reactions Monitoring, Dunedin New Zealand.

[CLICK HERE FOR FURTHER INFORMATION ON TRAMADOL AND A FULL REFERENCE LIST](#)

For further information on other high-risk medicines visit our website at: [www.saferx.co.nz](http://www.saferx.co.nz)