

EDİTÖRE MEKTUP

LETTER TO EDITOR

**VOMITING AND METOCLOPRAMIDE****Hatice Şeyma Akça, MD.\***

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Dear editor,

We read your case presentation titled 'Metoclopramide-induced dystonia' with interest (1). In patients with gastroenteritis, inflammatory bowel diseases, and neurological symptoms such as seizures, ischemia, and intracranial hemorrhage, vomiting symptom is observed and the physician should stabilize the patient. Although many physicians know that methaclopramide can cause dystonia, it is thought that this effect may occur in higher doses and we do not hesitate to use the drug as a part of the treatment. Metaclopramide is a dopamine antagonist and is also used in hyperemesis gravidarum together with ondansetron, a serotonin receptor antagonist (2,3).

The development of malignant neuroleptic syndrome(4) and an oculogyric crisis in a schizophrenic patient who received anticholinergic therapy after the use of methaclopramide (5) have been reported in the literature.

Medication side effects can occur in different ways, especially in the geriatric and pediatric patient group. Plasma drug levels can be detected at high rates in elderly patients using cardiac drugs, even if they do not have symptoms (6). In addition, symptoms may last longer after drug or substance use in children (7).

Yalçın et al. studied pediatric patients who developed dystonia due to oral methaclopramide use. Of the 20 patients included in the study, 16 had methaclopramide intake in the normal dose range, and the findings became evident 4 hours after taking the drug, and there was a positive significant correlation between biperiden lactate treatment and the recovery period (8).

In the case report of Kılıç et al., we observed that the patient's symptoms started within 2 hours after ingestion of oral metoclopramide solution and regressed within 1 day (1).

We observed from the studies and case reports that we should not ignore the effect of metoclopramide to cause dystonia, but this side effect will not prevent the widespread use of metoclopramide today.

It should be kept in mind that metoclopramide may cause dystonia in children as well as in adults, and patients and their relatives should be informed in patients who are scheduled to be discharged.

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