

## Comment to “Amlodipine overdose with hypotension and non-cardiogenic pulmonary edema”

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Dear Editor  
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We have read the interesting case report by Hirachan et al., entitled “Amlodipine overdose with hypotension and noncardiogenic pulmonary edema.”<sup>1</sup> The follow-up of the patient and the method of management are valuable and positive points in this report. However, there are some points that need to be more explained:

1. According to this report, the patient denied consumption of alcohol or any other drugs. We think that statement in patient with a suicidal intent is not enough to put aside consumption of alcohol or other drugs, so it is better that reporter used screening tests such as urine immunoassay screening tests or serum screening tests for some substances and drugs which can cause noncardiogenic pulmonary edema.
2. When the patient developed respiratory distress and other signs and symptoms of pulmonary edema plus hypotension (BP dropped to 70/50 mmHg), the therapists treated with intravenous diuretic. We believe that hypotension is a contraindication for intravenous diuretic treatment. Also diuretic treatment usually used in cardiogenic pulmonary edema not in noncardiogenic pulmonary edema.

3. The therapists was continued on intravenous Normal saline at 50 mililiter/hour, so pulmonary edema may occur due to liquid overload.

However, noncardiogenic pulmonary edema associated to amlodipine overdoses is a rare presentation, but it may occur without recurrent hypotension.<sup>2</sup> So these cases may become more challenging.

### References

1. Anish Hirachan, Sushil Baral, Miqdaadh Shareef, et al. Amlodipine overdose with hypotension and noncardiogenic pulmonary edema. *Nepalese Heart Journal* 2016;13(1): 27-29.
2. Hedaiaty M, Eizadi-Mood N, Sabzghabae AM. Noncardiogenic pulmonary edema after amlodipine overdose without refractory hypotension and bradycardia. *Case reports in emergency medicine*. 2015 May 5; 2015.(<http://dx.doi.org/10.1155/2015/546012>)

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