



Autoimmunity Research Foundation

3423 Hill Canyon Ave, Thousand Oaks, CA 91360

www.AutoimmunityResearch.org

email: Foundation@AutoimmunityResearch.org

phone: +1-805-492-3693

To health care providers treating this patient in an emergency situation:

This patient routinely takes Benicar (Olmesartan medoxomil) 40mg every four hours, as part of a clinical study of antibacterials in chronic inflammatory disease. It is essential to continue this dose and schedule of Olmesartan, even in the presence of hypotension, as abrupt withdrawal can be life-threatening.

This patient is also taking pulsed antibiotics which may provoke a cytokine storm needing emergency intervention. Cytokine storm symptoms may include:

- s/sx of impending M.I. (pain, dyspnea, diaphoresis, nausea, palpitations)
- alarming dyspnea, especially if accompanied by peripheral edema
- alarming throat tightening

Along with routine lifesaving procedures, it is essential to:

Continue Olmesartan 40mg dosing every four hours, with 20mg SL p.r.n., even if an NG tube is necessary.

If B/P is extremely low (mean arterial pressure <55), continue Olmesartan as above and increase fluid volume with 0.9 NS or packed red cells.

These antibiotics usually cause either an allergic reaction or a cytokine storm:

- azithromycin (note especially cardiovascular sequelae)
- clindamycin (note especially neurological sequelae)
- tetracyclines
- sulfa drugs

Flouroquinolone antibiotics are generally well tolerated, although instances of tendon damage have been reported. The patient should be advised of the FDA black-box warnings.

Cephalosporins **may** be tolerated, Claforin is usually OK.

The macrolide Biaxin is usually OK.

Do not give Corticosteroids in any form or by any route (injected, inhaled, oral or IV) as they may lead to metabolic instability.

Adverse reactions often occur if epinephrine or norepinephrine is used to raise B/P or treat anaphylaxis. **Use epinephrine and norepinephrine only for cardiac arrest.**

Local anesthetics containing epinephrine may cause adverse events (tachycardia, psychosis), and the epinephrine may hinder anesthesia.