

Advice for Angioedema due to ACE inhibitors

This can occur in up to 10% of patients and is NOT an allergy to the drug.

STOP drug and wait for 3 months. Advise patients to take a single dose of antihistamine Cetirizine or Loratadine 20 mg if angioedema recurs at any time.

If angioedema persists beyond 3 months of stopping drug, refer patient and ensure complement C3 & C4 levels are done.

ACE inhibitors can be replaced with one of Angiotensin II receptor blockers if necessary. It has a very low instance of angioedema.

In the absence of regular attacks of angioedema and/or urticaria no long-term prophylactic antihistamines would be indicated.

To treat any future attacks please advise the patient to take a single dose of antihistamine Cetirizine or Loratadine 20 mg **and** Prednisolone 20 mg.

Note:

1. Should there be any evidence or concern about upper airways compromise it is important that the patient contacts the ambulance services immediately.
2. Please note that Adrenaline (Epinephrine) auto-injectors are likely to be ineffective in ACE inhibitor-induced angioedema and therefore should not be prescribed routinely.
3. This is a class effect, so ensure no ACE inhibitor drugs are prescribed in the future.