Flomax associated with floppy iris syndrome in some men undergoing cataract surgery

At Hawaii 2005, the Royal Hawaiian Eye Meeting, David F. Chang, MD, updated the audience on this newly identified syndrome.
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WAIKOLOA, Hawaii – Surgeons should always obtain a history of the use of tamsulosin in male cataract patients, said David F. Chang, MD, because of that drug's association with a newly identified syndrome that can complicate cataract surgery.

Dr. Chang's warning echoes a physician advisory statement issued by the American Society of Cataract and Refractive Surgery regarding intraoperative floppy iris syndrome (IFIS), which has been found to be associated with the use of Flomax (tamsulosin, Boehringer Ingelheim). The ASCRS advisory was based on the results of studies by Dr. Chang and colleagues.

"Patients who have used Flomax were found to have a marked tendency to have a billowing, prolapsed iris," Dr. Chang said in a presentation here.

According to company product information on tamsulosin, the alpha-1 antagonist relaxes the muscle in the bladder neck and prostate, improving urinary flow in patients undergoing treatment for symptomatic benign prostatic hypertrophy.

Dr. Chang described two studies, one prospective and one retrospective, with a combined total of more than 1,600 patients. Dr. Chang said he and colleagues looked at the causes, incidences and possible treatment of IFIS in cataract patients who have used tamsulosin.

"We found a 2.3% incidence [of IFIS], and 95% of those patients had a history of Flomax use," Dr. Chang said at the meeting. He also said there was a 12.5% of incidence of posterior capsule rupture in the patients with IFIS in the retrospective study.

If a patient stops using tamsulosin 1 to 2 weeks before surgery, the risk of IFIS is reduced, "but it doesn’t always prevent it," Dr. Chang said.

To prevent IFIS from occurring, Dr. Chang recommended the use of iris hooks, iris expansion rings and Healon5 (sodium hyaluronate, Advanced Medical Optics) during cataract surgery. He also said that using bimanual microincision phacoemulsification could help because of the smaller incision, but he said “there is still a remarkable propensity for the iris to prolapse.”

Dr. Chang said further study of the syndrome is warranted.