

## Letters to the Editor

### Reply: “Dosage adjustment for hepatic dysfunction”

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*Key words: Liver disease. Drug prescription. Dose-response relationship.*

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*Dear Editor,*

In relation to the letter, we wish to make the following clarifications:

As the authors of the letter showed their search was carried out using different criteria and time periods. In our case the dosage recommendations were established in those drugs included in the Pharmacotherapy guide (GFT) of the hospital that were susceptible to adjustment in patients with CLD based on the information obtained from the following sources: a) technical data of medication; b) DrugDex Micromedex; c) WHO recommendations; and d) revision articles published in the last 10 years that include dosage recommendations by means of applying an explicit methodological procedure. Those articles were located by means of a Medline database search (Search strategy: “Hepatic”[Ti] OR “liver”[Ti]) AND (“Dose-Response Relationship, Drug”[Mesh]) AND (Review[ptyp] AND (English[lang] OR Spanish[lang]))

AND “2001/02/27”[PDat]: “2011/02/24”[PDat]). The search was complemented with “Scholar-google” y “Alquimia” search engines with the objective of identifying bulletins published by reference centers that included recommendations in CLD drugs dosage.

Padullés and cols. indicate that they found 46 differences in the recommendations of drugs dosage with the collections in our revision (Table I of the letter). It is not possible to evaluate the discrepancy in the recommendations based on the terms “more strict” or “less strict”, put forward, because they are not defined in the letter. In terms of the 10 drugs from table I (9 in reality), which differ with the adjustment recommendation which was published in our article, we maintain the original recommendations according to the bibliography and the criteria expounded in our publication.

We are very grateful for the interest of the authors of the letter, but we believe that a suitable framework for publication is not a letter to the director but a complementary revision article, where updated information of the drugs is contributed, scientific evidence and the criteria used is explained, defining whether the differences found with respect to our article are well documented and relevant from a clinical point of view, and in this way contributing to a better handling of the patients with liver failure.

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