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Zoledronic acid and red eye

*Urja Patel, MD, Chandani Patel Chavez, MD,
Majlinda Xhikola, MD, and Sushma Kadiyala, MD*

Introduction: Zoledronic acid, used for treatment of osteoporosis, Paget's disease of the bone, hypercalcemia of

malignancy etc. is a bisphosphonate known for its anti-resorptive effect. A common adverse reaction with this medication is mild to moderate flu-like symptoms, which is transient and attributed to an acute phase reaction post zoledronic acid infusion. [1] A less common adverse reaction is ocular inflammation, including uveitis, iritis and episcleritis. [1] The incidence of ocular inflammation is 0.2 - 0.8%. [2] Development of ocular symptoms have been reported to occur between 1 to 7 days post zoledronic acid infusion. [2] We report a case of acute unilateral episcleritis following zoledronic acid infusion for treatment of osteoporosis. Clinical case: A 58-year-old female with a past medical history significant for glaucoma and gastroesophageal reflux (GERD) presented for management of osteoporosis. She could not tolerate oral bisphosphonates due to gastrointestinal side effects. She was therefore switched to intravenous zoledronic acid therapy. On day 1 post zoledronic acid infusion of 5mg dose, she developed diffuse joint and muscle pain as well as right eye pain, redness, photophobia, blurred vision and tearing. As her ocular symptoms progressed by day 5 post zoledronic acid infusion, she presented urgently to ophthalmology clinic when she was diagnosed with episcleritis of the right eye secondary to the zoledronic acid infusion. Patient was started on prednisolone acetate eyedrops twice a day. Three days after starting the eyedrops, patient reported complete resolution of her ocular symptoms. Further treatment for osteoporosis with zoledronic acid was discontinued. **Conclusion:** We present a case of right eye episcleritis occurring 24 hours post zoledronic acid infusion leading to significant ocular discomfort and concern for the patient. Ocular inflammation is an uncommon occurrence post zoledronic acid infusion, hence is not often discussed during routine patient counseling in regards to risks and benefits of this particular treatment. We therefore stress the need for both provider and patient awareness regarding this uncommon ocular side effect related to zoledronic acid use. It is important to inform the patient and educate providers about the possibility of this acute phase reaction occurring post treatment with zoledronic acid to aid in prompt diagnosis and treatment. Our patient responded well to treatment with prednisolone acetate ophthalmologic drops. A rechallenge with zoledronic acid has not been pursued. References: 1. Jin X, Shou Z, Shao Y, Bian P. Zoledronate-induced acute anterior uveitis: a three-case report and brief review of literature. *Arch Osteoporos.*2021;16(1): 104. Published 2021 Jun 28. doi: 10.1007/s11657-021-00964-z 2. Patel DV, Horne A, House M, Reid IR, McGhee CN. The incidence of acute anterior uveitis after intravenous zoledronate. *Ophthalmology.* 2013 Apr;120(4): 773-6. doi: 10.1016/j.ophttha.2012.10.028. Epub 2013 Jan 3. PMID: 23290982

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