

CONTRAST AGENTS – PARAMAGNETIC GADOLINIUM AND MANGANESE CHELATES AND SUPERPARAMAGNETIC IRON-BASED PRODUCTS. THIRD WHO-ITA / ITA-OMS 2010 CONTRIBUTION USING WHO SYSTEM ORGAN CLASS DISORDERS (SOCDs) AND ADVERSE REACTION AND EVENT PREFERRED NAMES (ADRs)

Dan Bradu and Luigi Rossini*

Servizio Nazionale Collaborativo WHO-ITA/ITA-OMS, Universita' Politecnica delle Marche e Progetto di Farmacotossicovigilanza pre-, post-marketing, Azienda Ospedaliera Universitaria Ospedali Riuniti di Ancona, Regione Marche, Italia

Summary

WHO-ITA / ITA-OMS are acronyms adopted by the World Health Assembly for the delegation, composed of government ministers, of the sixth founding member, Italy, which subsequently hosted the 5th Annual Meeting of the Representatives of the National Participating Centres. This is where the first international collaborative data collection and electronic exchange network began its activity. The Centre's headquarters are in Uppsala, Sweden, set up with funds from the Swedish government. The data, generously been made available by the international Centre to one of the authors (L.R.) (Cf [5]), who has continuously collaborated with it for more than 40 years, consist of reports of 201,928 adverse drug reactions (ADRs) that were received by the WHO in the framework of its Drug Monitoring Programme, 50,765 from 1968 to 1989 and 151,153 from 1990 to 2010. Their aggregation into 30—later 32—WHO-system organ class disorders & codes (SOCDs), corresponds to the basic adverse reactions and events collated as preferred names and codes in the still only comprehensive world database.

On July 5, 2010 we applied for and obtained the full PR22-2010 dataset of the current classification of ATC V08 diagnostic contrast agents. The SOCDs related to the seven most frequently reported iodinated radiographic products were extracted (103,035 cases, subdivided in two 20-year periods) and processed with a novel software in a pilot study (See [17]). The software has been thereafter improved, modified and finally substituted with a new technique, which has been applied to the study of all diagnostic contrast agents until the present time, analysing the full ADR dataset on all V08CA-NMR paramagnetic imaging contrast agents: 1 - gadobenic acid, 2 - gadobutrol, 3 - gadodiamide, 4 - gadofosveset, 5 -

gadopentetic acid, 6 – gadoteric acid, 7 – gadoteridol, 8 – gadoversetamide, 9 – gadoxetic acid, and 10 – mangafodipir, and on all previously introduced V08CB-NMR superparamagnetic imaging products 1 – ferristene, 2 – ferriyan, 3 – ferumoxides, and 4 – ferumoxil. Most of the 38,523 ADRs were reported in the second 20-year period, with the exception of 305 ADRs for gadopentetic acid, introduced previously, which pertained to the first 20 years. Their total SOCDs and ADRs frequencies were published, and the updated statistics applied, yielding clustering groups and confirmatory plots.

A set of 12 common physico-chemical parameters was also evaluated for all 9 Gd-paramagnetic chelates, in order to obtain a more comprehensive analysis correlating ADR groupings to at least a basic set of analytically identified features, to find a logical relationship between experimental data and the clinical exploratory epidemiological model being developed. Indeed, also for the diagnostic agents used more frequently, the current subdivision into ionic and nonionic, which is related to different osmolalities, and/or macrocyclic or linear characteristics, etc, namely to highly individual and personal criteria, is not wholly convincing, and the most commonly recognized toxicological facts and the potential safety data would benefit from a more objective qualification.

Finally, some new suggestions to improve and connect the Programme to other ongoing studies and global perspectives are presented.

Key words: WHO-Uppsala Gadolinium-, Manganese- and Iron-based NMR diagnostic contrast agents monitoring; correlation based clustering and confirmatory Euclidean plots. Comparisons of WHO-System Organ Class Disorders and/or ADRs (preferred names) collected from the beginning of the WHO-Uppsala Centre for international collaborative monitoring of ATC V08CA gadobenic acid, gadobutrol, gadodiamide, gadofosveset, gadopentetic acid, gadoteric acid, gadoteridol, gadoversetamide, gadoxetic acid and mangafodipir, and V08CB ferristene, ferriyan (ferucarbotran), ferumoxides and ferumoxsil products.

Corresponding author, retired October 31, 2008. Reference groups in inverse temporal order; books, full papers and complete “journal papers” copies, summarized and annotated, available from the home archives. Postal and email addresses: DB, Borochov 28/14, Raanana 43433, Israel; bradu@smile.net.il; LR, Via Conero 115 A, 60129 Ancona, Italy; rossiniluigi@hotmail.it.

“Nobody has answered or will ever answer this question, because it’s the absolute truth”.
Sergej P. Mel’gunov, Red Terror in Russia (1918-1923). 1st Italian ed., Jaca Books October 2010, p 101.

Since 2006, with the publication of the report by Grober & al in April [1] and a press release of the Danish Medicines Agency in May describing a possible association between nephrogenic systemic fibrosis (NSF) and gadolinium-based contrast agents (GBCAs), mounting data have been indicating that GBCAs increase the risk of developing NSF in patients with severe renal insufficiency or renal dysfunction due to hepato-renal syndrome and (in the perioperative period), in liver transplant recipients. Indeed, a 1996 retrospective analysis of the routine laboratory data and clinical course of 15,830 patients who had received intravenous gadolinium diethylenetriamine pentaacetic acid (DTPA) dimeglumine (gadopentetate dimeglumine, Magnevist R, the first linear ionic gadolinium chelate, approved in the US in 1988) while undergoing 3D contrast-enhanced MRI of the brain and spine, 151 of whom had impaired glomerular filtration [a creatinine value > 2 mg/dL; mean half-life of the product eliminated unaltered by glomerular filtration calculated in normal subjects to be 1.6 h, vs up to 30 h in patients with creatinine clearance < 20 mL/(min x1.73m²)] was unable to detect any clinical adverse effect in patients with impaired renal function for a period spanning 3 days before to 30 days after administration [2]. This further demonstrates how difficult it can be to find such effects in single studies. In 1990 the same product at the customary dosage had previously been reported to induce no nephrotoxic reaction in 5 patients with renal insufficiency [3], a reliable finding since the study had been registered according to the standard procedure for clinical trials. However, a retrospective review of 6 NSF cases, diagnosed from 1997 to 2007 by skin biopsy 19 days to 2 months after gadodiamide injection (Omniscan R, a linear nonionic medium with 5% excess of free ligand in the formulation), suggested agent dechelation as the cause of NSF. This led to call for changes in clinical practice [4]. These examples, which are certainly not isolated, highlight not only the well-known fact that even the best individual clinical pharmacotoxicology studies unfortunately need to be repeated, but also that disasters due to lack of data on drug safety depend first of all on the flawed design of the clinical trials themselves as well as on an irresponsible failure to adopt alternative designs, which do exist, despite repeated lessons and alarms (Cf [5]), which clearly do not exclude the same problems related to gadolinium-based diagnostic products.

In some more recent studies (Cf [6]), and in the 2008 safety report [7], NSF were described after administration of another linear nonionic chelate, gadoversetamide (OptiMARK R; low thermodynamic stability 16.7, acid dissociation rate $2.2 \times 10^{-2} \text{ sec}^{-1}$, half-life 1.73 h, 10% excess free ligand in the preparation); a case of NSF was also reported in the US in relation to the macrocyclic nonionic product gadoteridol (ProHance R; thermodynamic stability 23.8, acid dissociation rate $6.4 \times 10^{-5} \text{ sec}^{-1}$, half-life 1.57 h, 0.1% excess free ligand [8]). So far (see [6 - 8], and later [18] and [20]), more than 90% of all NSF cases have occurred after exposure to linear nonionic gadodiamide (low thermodynamic stability 16.9, dissociation rate $2.2 \times 10^{-2} \text{ sec}^{-1}$, half-life 1.30 h), followed by ionic linear gadopentetate dimeglumine (thermodynamic stability 22.3, acid dissociation rate $1.2 \times 10^{-3} \text{ sec}^{-1}$, half-life 1.50 h, 0.1% excess free ligand), whereas to our knowledge no cases have yet been published or reported in relation to the macrocyclic ionic product gadoterate meglumine (Dotarem R; thermodynamic stability 25.6, acid dissociation rate $8.4 \times 10^{-7} \text{ sec}^{-1}$, half-life 1.50 h, 0% free ligand), subjected to specific post-marketing registered use (Cf [9]).

Finally, also the last FDA Drug Safety Newsletter of August 13, 2009 [10] insisted on the need to help define risk factor for NSF, while the FDA has not approved GBCAs for use in magnetic resonance angiography, and only five GBCAs have been approved (Gadodiamide - Omniscan R, gadopentetate dimeglumine - Magnevist R, gadoteridol - ProHance R, and gadoversetamide, OptiMARK R mentioned above; gadobenate dimeglumine, MultiHance), while the other two contrast agents ferumoxides, Feridex R, and mangafodipir, Teslascan R, an iron-superparamagnetic, and a manganese paramagnetic-containing injection solution, have been approved by the FDA only for liver imaging. On November 19, 2009 the European Medicines Agency issued recommendations to minimize the risk of NSF related to GBCAs, which were classified into high-, medium-, and low-risk categories [11] based on a report of the American College of Cardiology Foundation Task Force on Expert Consensus Documents [12], and a survey of nephrologists' perception and practices on NSF [13], among other contributions. Not only NSF, but other general events and adverse reactions that may be seen or diagnosed, reported and collected in the International Bank will be examined. Similar to GBCAs, iodinated contrast media used in computed tomography scanning can result in the potentially fatal contrast-induced nephropathy (CIN) for which the highest risk patients are those with moderate-to-severe chronic kidney disease (CKD, stage 3-5). Various studies ([14]; see also later [16], [18] and [20]) recall different overlapping, prevalently non-systematic studies. Although large grants are being offered [15], any work that does not adopt new model ideas on associated specific risk factors, more selective methods (Cf [16]), and stringent long-term cohort post-marketing verifications may entail unjustifiable waste of effort and of increasingly more limited resources. Therefore, while "once is never enough", indefinitely repeated studies that are not based on substantially new rationales are nonetheless useless.

In this context we have recently presented two reviews on the WHO 30 aggregated system-organ class disorders (SOCDs) and the most frequently reported adverse effects and events (ADRs; preferred names) to seven iodinated X-ray contrast agents [17] collected over two 20-year periods. Here we analyse for the first time similar comparative data regarding the ADR reports collected in the WHO-Uppsala database for all ATC MRI-enhancing VO8C-A and B products and try to explore them objectively using a more appropriate clustering procedure. Our next effort will be devoted to assessing other ATC VO8A/A, B, C and D iodinated contrast agents, their more frequent, common and/or selective clinical toxicities, and their burden on national health budgets, with special emphasis on those that allow substitutions.

1. Data presentation and correlation clustering of SOCD frequencies of ATC VO8AC A and B NMR products

1.1. VO8CA paramagnetic products. Tables 1 and 2 of SOCD frequencies

Table 1 (1990-2010). Ten ATC V08ACA NMR paramagnetic contrast agents and their number of reports, total or for each of the 29 WHO SOCD codes. Reports sent on 5.7.2010 by Dr Marie Lindquist, Director, WHO Uppsala Collaborating Centre for 1990-2010, new PR-22-2010 file. SOCD numbers and codes: 1 - 0100, Skin and appendages; 2 - 0200, Musculo-skeletal; 3 - 0300, Collagen; 4 - 0410, Central & peripheral nervous system; 6 - 0431, Vision; 7 - 0432, Hearing and vestibular; 8 - 0433, Special senses; 9 - 0500, Psychiatric; 10 - 0600, Gastrointestinal; 11 - 0700, Liver and biliary; 12 - 0800, Metabolic and nutritional; 13 - 0900, Endocrine; 14 - 1,010, Cardiovascular, general; 15 - 1,020, Myo-, endo- pericardial & valve; 16 - 1,030, Heart rate and rhythm; 17 - 1,040, Vascular (extracardiac); 18 - 1,100, Respiratory; 19 - 1,210, Red blood cell; 20 - 1,220, White cell and RES; 21 - 1,230, Platelet, bleeding & clotting; 22 - 1,300, Urinary; 23 -

1,410, Reproductive, male; 24 – 1,420, Reproductive, female; 25 – 1,500, Foetal; 26 – 1,600, Neonatal and infancy; 27 – 1,700, Neoplasms; 28 – 1,810, Body as a whole, general; 29 – 1,820, Application site; 30 – 1,830, Resistance mechanism. SOCD 5 - 0420, autonomic nervous system: zero reports. New SOCD 31 – 2,100, Poison specific terms, and 32 – 2,000, Secondary term had not been used.

	1 SOCDS (Code)	2 Gadobenic acid	3 Gadobutrol	4 Gadodiamide	5 Gadofosveset	6 Gadopentetic acid	7 Gadoteric acid	8 Gadoversetamide	9 Gadoxetic acid	10 Mangafodipir	Reports (Total number)
1	100	862	189	1,073	5	4,119	1	504	371	20	7,144
2	200	192	6	330		402		166	216		1,312
3	300			10		4			2		16
4	410	530	91	593	10	2,041	2	384	329	8	1
6	431	53	10	43	2	323		28	8	1	468
7	432	1	3	6		26		2			38
8	433	16	3	39		100		2	2	1	163
9	500	599	9	735		1,109		585	620	3	3,660
10	600	792	129	419	6	2,836	3	217	66	12	4,480
11	700	6	1	25		36		4	5	2	79
12	800	14	3	39		94		12	21		183
13	900	1		7		9		1	5		23
14	1,010	149	43	79	5	597		115	47	2	1,038
15	1,020	10	3	25	2	51		9	23	2	125
16	1,030	79	21	56	5	416		48	19	4	648
17	1,040	48	28	72	3	627		24	34	3	841
18	1,100	414	111	264	14	2,713	2	243	73	15	2
19	1,210		1	25		18		1	4		49
20	1,220	3	2	3		26		2	3		39
21	1,230	12	2	21		49		8	16		108
22	1,300	57	19	77	1	521		36	18	1	730
23	1,410	2		2		2		1	2		9
24	1,420		1	3		5		1			10
25	1,500	1		2		11		2			16
26	1,600			1		1		1			3
27	1,700	51		85		84		46	55		321
28	1,810	1,399	160	1,270	9	3,035		938	814	20	3
29	1,820	40	2	28	1	520		3	13	4	611
30	1,830	50		102		122		45	70		389
Total	5,381	837	5,434	63	19,897	8	3,428	2,836	98	9	37,991

Table 2 (1968-1989). ATC V08ACA NMR paramagnetic contrast agents and their number of reports, total or for each of the 29 WHO SOCD codes. Reports sent on 5.7.2010 by Dr Marie Lindquist, Director, WHO Uppsala Collaborating Centre for 1990-2010, new PR-22-2010 file. Number 5, gadopentetic acid, was the only available product (since 1988), and its SOCD numbers and codes are already specified as named in the legend to Table 1.

SOCDs(Code)	Gadopentetic acid	5	
		Reports (Total number)	
1	100	61	61
4	410	47	47
6	431	6	6
8	433	1	1
9	500	2	2
10	600	51	51
14	1,010	9	9
15	1,020	1	1
16	1,030	6	6
17	1,040	13	13
18	1,100	38	38
20	1,220	3	3
21	1,230	1	1
22	1,300	9	9
28	1,810	26	26
29	1,820	31	31
Total	305	305	305

1.2. V08CA paramagnetic products. Correlation clusters and confirmatory plots.

Data for VO8CA products, 1968-2010 (29 x 10)(identical to data for VO8CA 1990-2010 (Table 1), with the sole addition of gadopentetic acid, years 1968-1989, for 16 classes (Table 2)).

We have already attempted to obtain an auto-classification of Iodinate Contrast Agents starting from tables of ADRs frequencies, where the rows represented categories of ADRs, and the columns- Agents.

In a first version, a clustering technique for the columns was used, based on the WILKS's Chi-Square statistic. In this technique, the WILKS's statistic square root gives the diameter of any

subset of columns and in particular, a pair- wise column dissimilarity (a pseudo- distance) function.

The attraction of this approach is that it permits an objective clustering within the frame of a GABRIEL Simultaneous Testing Procedure. However, in spite of its appeal, this technique failed to correctly identify the sets of agents having close ADR profiles. The point which we missed was the fact that WILKS's statistic small values can originate also in configurations other than subtables with close ADR profiles (such as in the cases of tables where one or more of the agents have small ADR values throughout).

The solution was to change the inter-column pseudo-distance. The appropriate choice was to define this pseudo-distance in terms of the "brute correlation" of the two column vectors (brute in the sense that averages are not subtracted), that is of their multidimensional cosine. This choice proved itself successful.

We proceed now with the description of **this alternative technique, using an exact inter- column distance function, based on the multidimensional cosine of the column vectors, that is on their "brute" correlation coefficient.**

Our data sets are contingency($r \times c$) tables $X = \{x_{ij} : i = 1, 2, \dots, r; j = 1, 2, \dots, c\}$, with nonnegative elements. The r rows correspond to ADRs and the c columns, to the drugs. Each combination (i, j) is a cell of the table, with which is associated the cell value x_{ij} , the value of the ADR i for the drug j . Denote by x_{i+} the sum of row i , by x_{+j} the sum of column j and by x_{++} the total sum of elements of X .

If one divides all the elements of column j by the column total x_{+j} , one obtains **the column j profile**,

a vector of weights $\frac{x_{ij}}{x_{+j}}$ summing up to 1. Two columns have **the same profile** if and

only if they have **proportional elements**, i.e. the elements of one column can be obtained from those of the other column by multiplying by the same nonzero factor. A table in which **all column profiles coincide**, has a multiplicative structure expressed by the relations

$$x_{ij} = \frac{x_{i+}x_{+j}}{x_{++}} : i = 1, 2, \dots, r; j = 1, 2, \dots, c.$$

Or, in other words, all column profiles coincide with the **marginal column profile**

$$\left\{ \frac{x_{i+}}{x_{++}} : i = 1, 2, \dots, r \right\}.$$

One introduces in the Euclidean Space R^r to which the column vectors belong, a **dissimilarity measure** d defined on pairs of vectors of this space, measuring the departure of the pair from the situation of having the same profile, i.e. from being proportional. If $a = (a_1, \dots, a_r)'$ and $b = (b_1, \dots, b_r)'$ are **two vectors of R^r** , then we define **their dissimilarity** $d(a, b)$ as:

$$d(a,b) = \sqrt{\frac{1 - \cos(a,b)}{2}} ,$$

where $\cos(a,b)$, the multidimensional cosine of a,b , is given by:

$$\cos(a,b) = \frac{a'b}{\sqrt{(a'a)(b'b)}} = \frac{\sum_{i=1}^r a_i b_i}{\sqrt{\sum_{i=1}^r a_i^2} \sqrt{\sum_{i=1}^r b_i^2}} .$$

The measure $d(a,b)$ in general, takes values between 0 (for a,b proportional with a positive factor of proportionality, and their respective profiles identical) and 1 (for a,b proportional with a negative factor of proportionality). In our case, a,b are column vectors with non-negative coordinates, and $d(a,b)$ varies from 0 to $\frac{1}{\sqrt{2}}$ (for a,b orthogonal).

Most of the dissimilarity measures in use are not true distances. But **the dissimilarity measure $d(a,b)$ is a true distance**. One can prove that it satisfies the triangle property: for any vectors a,b,c , one has

$$d(a,b) \leq d(a,c) + d(c,b) .$$

We will call $d(a,b)$ simply **the distance between a and b** .

The **Diameter of a subtable** formed of columns is defined as the largest distance between two columns of the subtable. At one end, we have the diameter of the set X itself; on the other end, the diameters of the subtables formed of just two columns. In the latter case, the diameter is simply the distance between these two columns. In fact, even subtables of one single column may be considered, regarding such a subtable as containing two identical columns. Its diameter must obviously be taken as equal to zero. The diameter as a function defined over the subtables of columns, is **monotonic with respect to the relation of subtables inclusion**: if S_1 and S_2 are subtables of columns such that $S_1 \subseteq S_2$, and $diam(S_1)$ and $diam(S_2)$ are their respective diameters, then $diam(S_1) \leq diam(S_2)$.

Let $\delta > 0$ be a **gauge** arbitrarily chosen. A subset S of columns is **δ -homogeneous** if $diam(S) \leq \delta$. Of course, the smaller is δ , the closer is S to a subset of columns having the same profile. This can be **visualized by a common plot of the column profile values versus the row indices** $1, 2, \dots, r$. The closer the column profile curves are, the more useful will be for us the set S . **A better variant of this common plot is obtained by taking as abscissas instead of the row index i , the mean (arithmetic or geometric) or the median of the i^{th} profile values of the involved columns.** It is to be desired that **the curves corresponding to columns shall be rather close to the bisector of the first quadrant**.

Given a gauge $\delta > 0$, our aim will be to **group the columns** (drugs in our case) **into clusters**. A cluster is a **maximal δ -homogeneous set of columns**. Being maximal, means being such that any larger subset including it will be non-homogeneous.

Assuming that we know how to split the columns into clusters for any given $\delta > 0$, we will try by playing with δ , to achieve a compromise between two opposite aims: to have **clusters as large as possible** on the one hand, and clusters **of as small a diameter as possible**, on the other hand.

Once this is done, the clusters will represent suggestions made by the statistician to the specialist, who will try to **find out the connection, if any, between the drugs (columns) which enter into the composition of each cluster**. It is clear that in this subsequent research, **only clusters containing at least two columns (drugs) are of interest**.

Our technique will consist mainly from constructing a **binary tree clustering based on a technique for optimally splitting a set into two subsets**.

We use a program written by us, following the elegant metaphoric explanation (which amounts to a pseudo-algorithm) given by **Leonard Kaufman and Peter J. Rousseeuw** in their book "**Finding Groups in Data, An Introduction to Cluster Analysis**", 1990, John Wiley [27], Chapter 6, Divisive Analysis, pp. 253-279.

In our implementation, the result of the algorithm is a table of the subsets obtained in the successive splitting into two, ordered on decreasing diameter. This table permits to tackle the problem formulated above.

As additional checking means, we use

a) **A graphical procedure whose result is an Euclidean Map** where the columns of the table are represented by markers, **the Euclidean distances between markers approximating the inter-column distances**. One starts from the matrix of column pair-wise dissimilarities (proper distances in our case), and by means of the Torgerson-Gower **Multi-Dimensional Scaling**, one obtains a "**reification**", that is a set of points in an Euclidean space, whose pair-wise Euclidean distances approximate the pair-wise (dissimilarity) distances. The coordinates are ordered in decreasing importance, and the first two are used in the Euclidean Map which permits to see the cluster structure of the columns to an extent which **will confirm the clustering already obtained**.

This is true, provided the GOF (Goodness of Fit) given by the first two dimensions is high enough. Otherwise, some of the pair-wise dissimilarities may be poorly approximated.

b) The plots described above, which permit to get an idea of **the extent to which the clusters are homogeneous**.

We will understand better the clustering procedure by following it on an example.

As example we take the **Paramagnetic Contrast Media Data**, given as a 29x10 table of ADRs frequencies. The columns stand for drugs as follows:

1. Gadobenic ac	5381 reports								
2. Gadobutrol	837 "								
3. Gadodiamide	5434 "								
4. Gadofosveset	63 "								
5. Gadopentetic ac	20202 "								
6. Gadoteric ac	8 "								
7. Gadoteridol	3428 "								
8. Gadoversetamide	2836 "								
9. Gadoxetic ac	98 "								
10. Mangafodipir	9 "								

The rows stand for 29 categories of SOCD-ADRs.

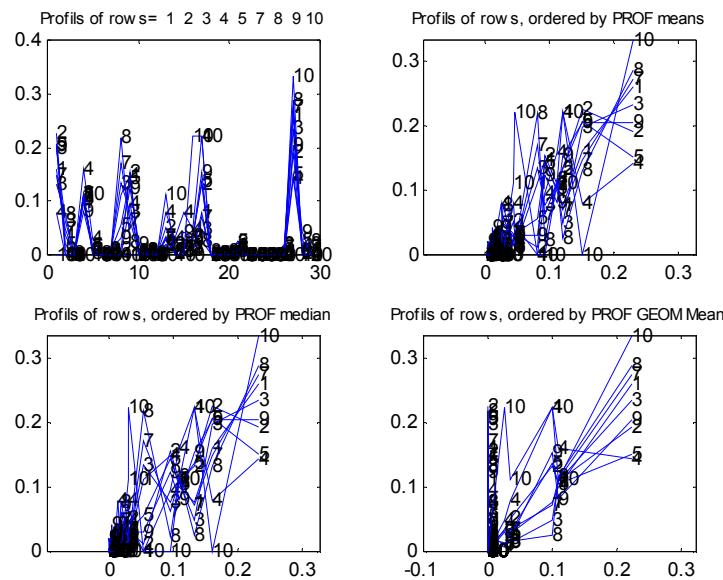
The result of the successive splitting in two algorithm described is the following **Table 3**. The ones show the columns included in the subset. The subset Nr.0 contains all the columns, hence is uninteresting. The last 10 subsets are singletons, of diameter zero. They are also uninteresting. We take up the subsets from Nr.1 to Nr.7.

Table 3.

Diameter (Gauge)	Column										Subset
	1	2	3	4	5	6	7	8	9	10	
.60116	1	1	1	1	1	1	1	1	1	1	0
.4752	1	1	1	1	1		1	1	1	1	1
.39324	1	1	1		1		1	1	1		2
.3359				1						1	3
.22853	1		1				1	1			4
.11137		1			1				1		5
.10593			1				1				6

.09087		1			1					7
0	1									
0		1								
0			1							
0				1						
0					1					
0						1				
0							1			
0								1		
0									1	

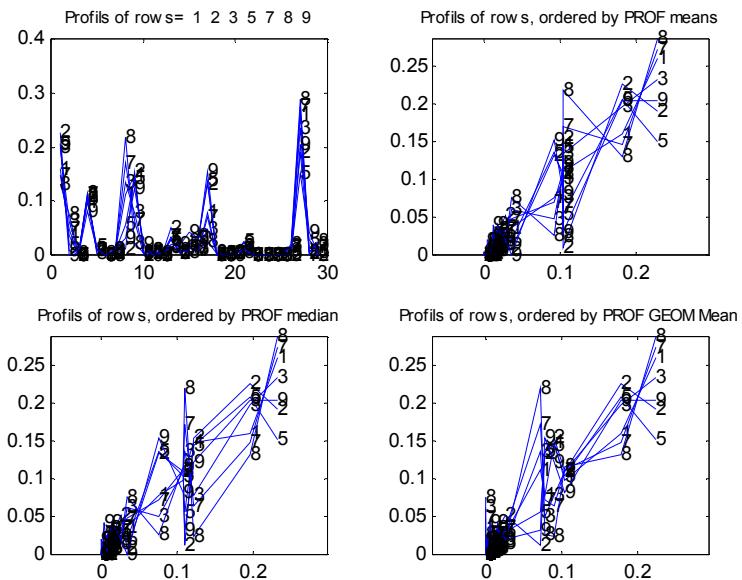
The **subset Nr. 1**, of diameter .4752, is maximal: any other subset is included in it. That means that this subset, specifically of columns 1,2,3,4,5, 7,8,9,10 can be viewed as giving a splitting of the table into two clusters, the second being the singleton 6. The following plot, shows that this cluster is of poor quality:



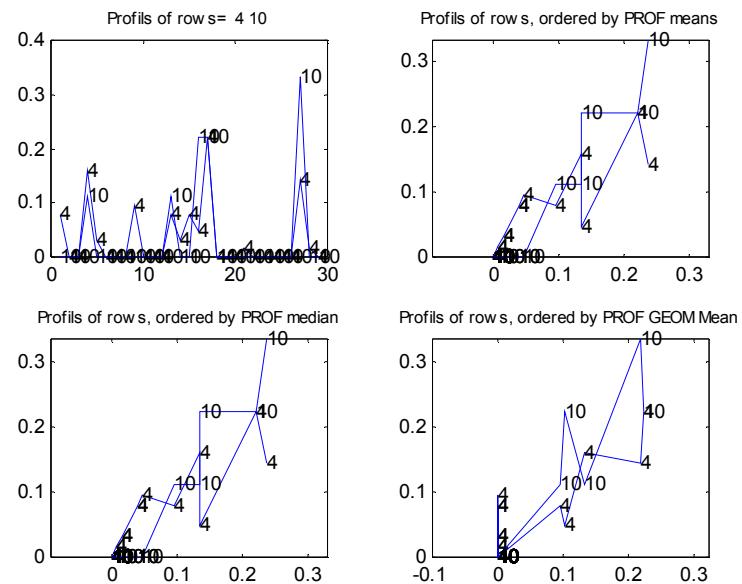
The **subset Nr. 2**, of diameter .39334, of columns 1,2,3,5,7,8,9 can be taken as cluster, and this eliminates the subsets Nrs. 4, 5, 6, 7 which are all included in it. The next not included, is the

subset Nr. 3, of diameter .3359 and of columns 4 and 10. Subset Nr. 2, subset Nr. 3, and the singleton 6, give a splitting of the columns into three clusters.

The plot for subset Nr. 2, shows it to be a rather poor quality cluster:



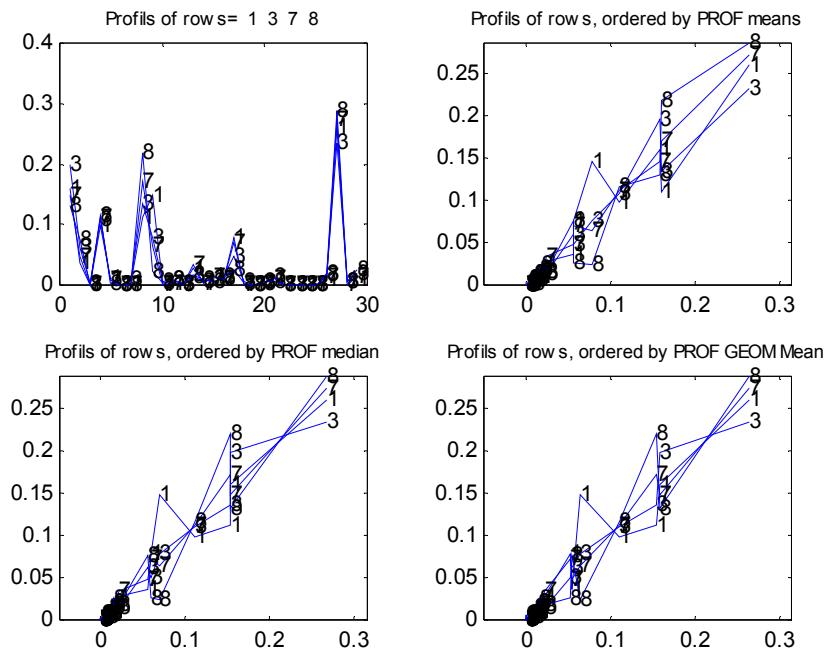
and the plot for subset Nr. 3,



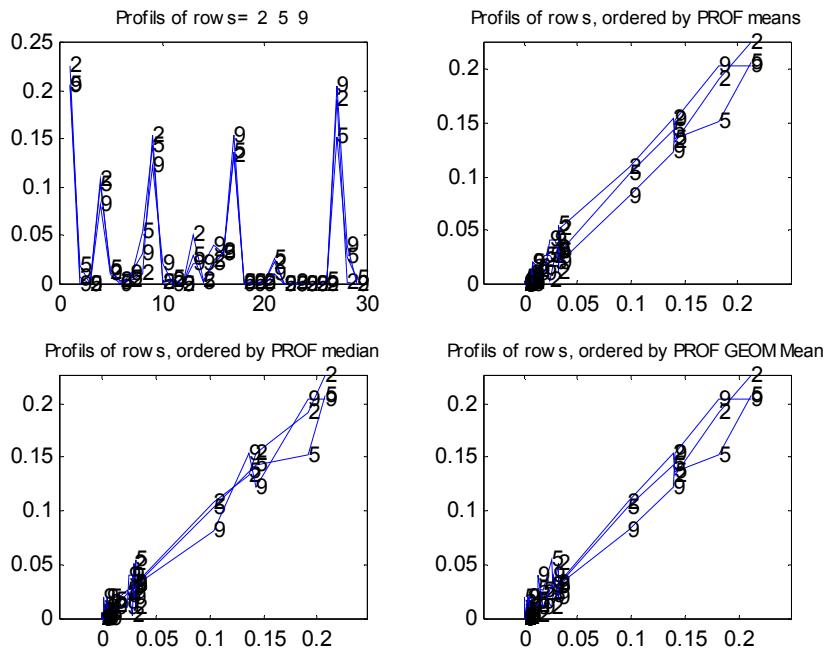
is still worse. This cluster system is unsatisfying.

The next candidate to be considered is the **subset Nr. 4**, of diameter .22853 and of columns 1, 3, 7, 8. This choice excludes subset Nr. 6, but admits **subset Nr. 5**, of diameter .11137 and of columns

2,5,9. This choice further eliminates subset Nr. 7. We have thus obtained the splitting of the columns into **cluster 1 = 1, 3, 7, 8**, **cluster 2 = 2, 5, 9** and the **three singletons** 4,6 and 10. The Plot

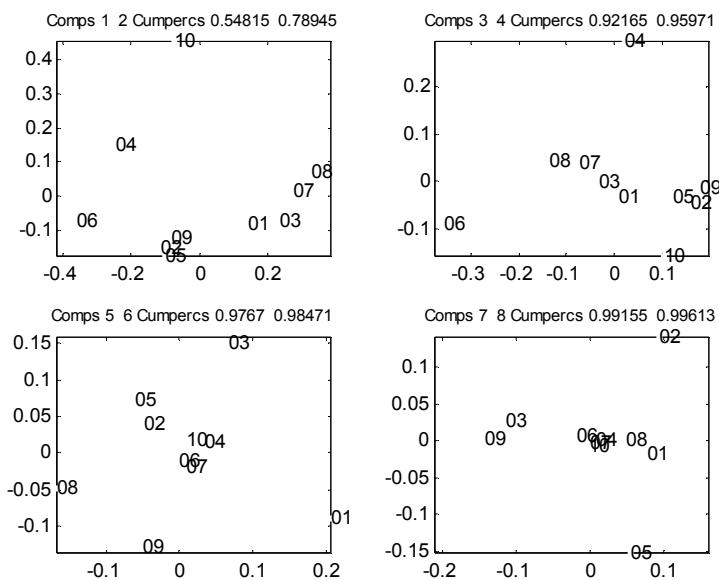


shows cluster 1 as [rather](#) acceptable, and the plot



shows cluster 2 to be rather good. We may stop here and **recommend to the specialist scientist to concentrate his attention on subset 1, 3, 7, 8 and on subset 2, 5, 9.**

The confirmatory plots, of which in most cases the plot of the first two coordinates is already sufficient for confirmation, are here

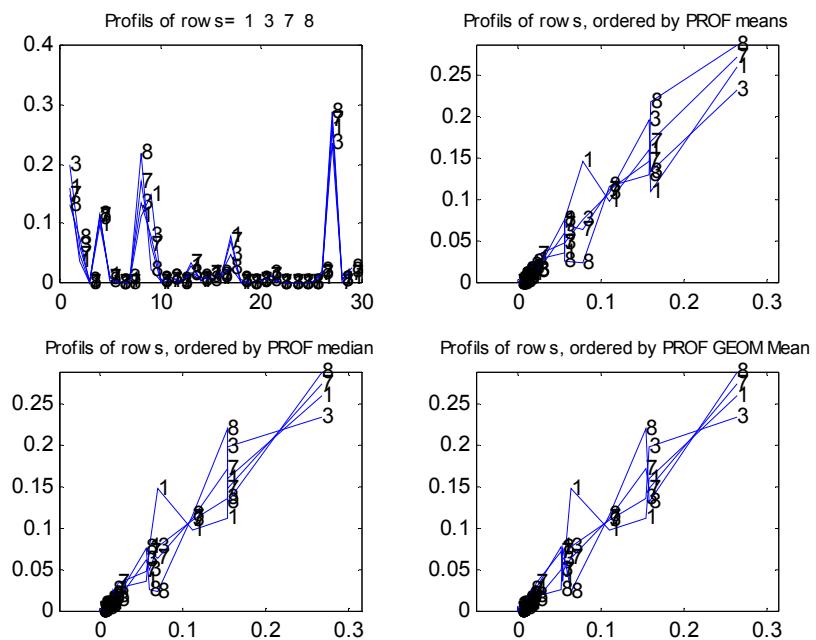


The two clusters 1, 3, 7, 8 and 2, 5, 9 appear clearly (on the lower part of the plot of components 1, 2) and so do the singletons 6, 4 and 10.

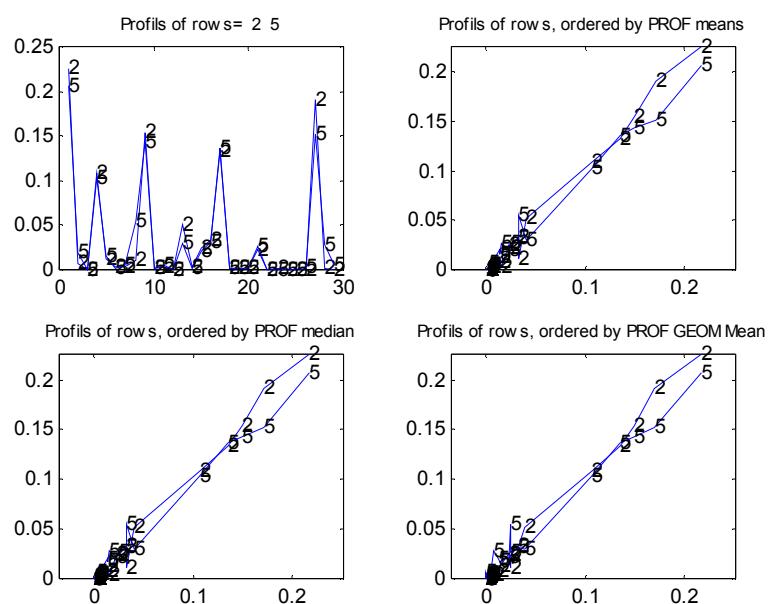
Note finally, that the singletons 4, 6, and 10 have the smallest number of reports, and cannot thus be taken seriously. The same holds for the product-column 9, which has a small number of reports too.

We may mention here, without the detailed explanation given above, that if the Data Set is reduced leaving aside the products with small total reports, that is n 4-Gadofosveset (ADRs n 63; 0.16%), n 6-Gadoteric acid (ADRs n 8; 0.02%), n 9-Gadoxetic acid (ADRs n 98; 0.25%) and n 10-Mangafodipir (ADRs n 9; 0.02%), one obtains by the same technique applied with GAUGE = .23, the same cluster 1: 1 3 7 8, and cluster 2: 2 5. The relevant plots are here:

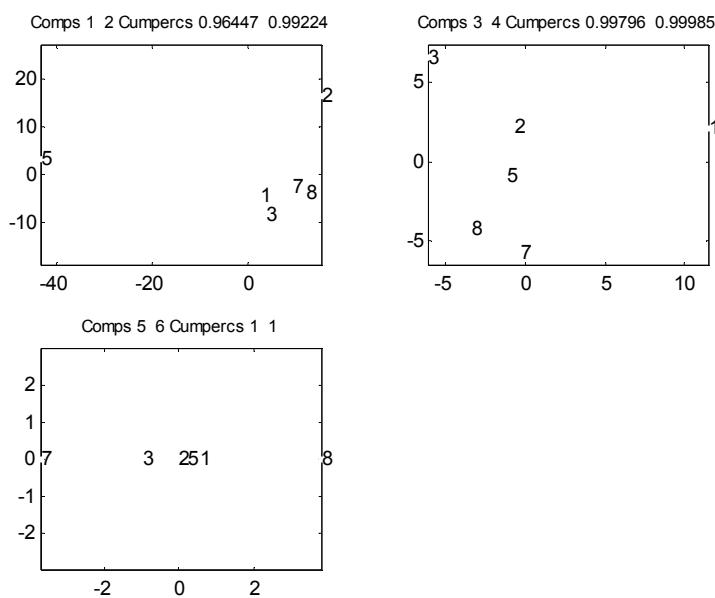
Cluster 1: 1 3 7 8



Cluster 2: 2 5



Confirmatory plots:



In conclusion, in the case of both the above 29x10 dataset (for the full series of 10 paramagnetic agents and 29 WHO-accepted SOCD-ADRs classes), and the reduced 29x6 data set (for 6 most reported Gd-chelates) the algorithm extracts the same two clusters. Namely, one cluster including gadobenic acid, gadodiamide, gadoteridol and gadoversetamide and a second cluster including gadobutrol and the mostly reported gadopentetic acid (with the possible addition of more sparsely reported gadoxetic acid).

1.3 V08CB superparamagnetic products. Table 4. Data of SOCD frequencies

Table 4 (1990-2010). ATC V08CB NMR superparamagnetic contrast agents and numbers of reports, total or for each WHO SOCD code. Reports sent on 5.7.2010 by Dr Marie Lindquist, Director, WHO Uppsala Collaborating Centre as per 1968-2010 years new PR-22-2010 file. SOCD specifications as in the legend to Table 1.

SOCDs (Code)	Ferristene	Ferrixyan	Ferumoxides	Ferumoxsil	Reports (Total number)
1 100	1	13		14	28
2 200		1			1
4 410		14	1	7	22
9 500		2		4	6

10	600	1	10	3	9	23
11	700				1	1
12	800		1		1	2
14	1,010		16	5	7	28
15	1,020		1			1
16	1,030		2	1	5	8
17	1,040		1		7	8
18	1,100		9	1	11	21
21	1,230				1	1
22	1,300		2		4	6
28	1,810	1	17	8	42	68
29	1,820			1	1	2
30	1,830		1			1
	Total	3	90	20	114	227

1.5. V08CB superparamagnetic products. Statistical evaluations based on their standardized SOCDs

DATA 17 x 4, 1990-2010 (2 V08CB)

The four substances data do not clearly indicate any clustering. Of course this holds for the present time, when too few ADRs have been recorded. Collection of additional data should change the situation.

2. ATC-VO8C A and B NMR products. ADR data frequencies and their evaluation by modelling and autoclassification

2.1. V08CA- paramagnetic diagnostic imaging agents. ADR data

In the **Appendix Nr. 1.** the ADR frequencies of all products monitored according to the PR22-2010 file are reported. For each product we list (in bold, in brackets) the total number of ADRs, the frequencies in rising order as aggregated in the WHO-standardized SOCDs, numbered in increasing order, their codes and total numbers per class (in bold, in brackets), totalling 38,296 ADRs reported in the first 40 years. These SOCD-ADRs data can be reduced from 2364, the maximal ordinal number of the involved ADRs to only the 700 appearing, as shown in the **Appendix Nr. 2.**

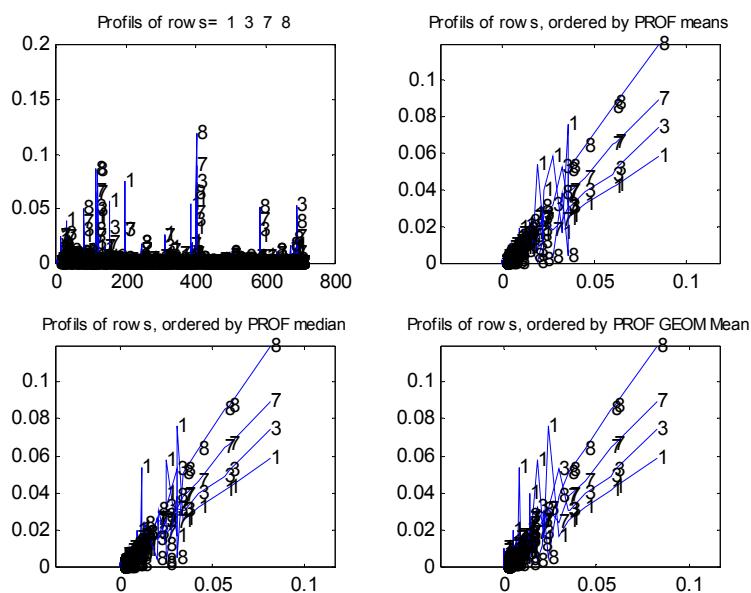
We will deal here first with the data set of the 700 represented ADR-rows x the 10 product-columns, and next for the matrix of the reduced 3% (eliminating in their order all the rows which together, do not contribute more the 3% of the total of the data) 259 data-rows x same 10 columns. In both cases, we will also apply the clustering technique to the 6 most reported products by retaining the columns 1, 2, 3, 5, 7 and 8, and leaving out the columns 4, 6, 9 and 10, as performed on the SOCD-ADRs classes of the Section 1.2. above. The numeration of the drug was kept

always the same. We will give only the results, the full treatment having been already illustrated as the example given in the same Section 1.2.

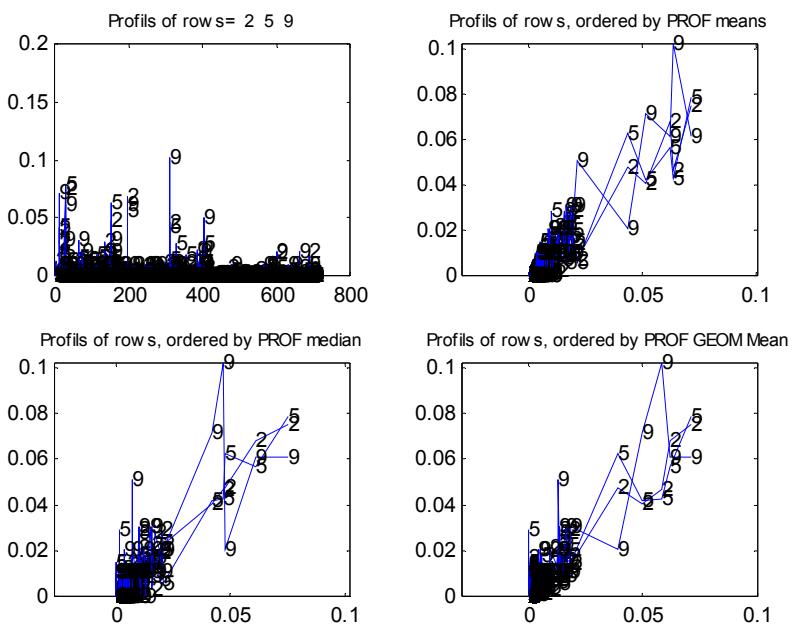
DATA SET 700x 10

GAUGE = .42

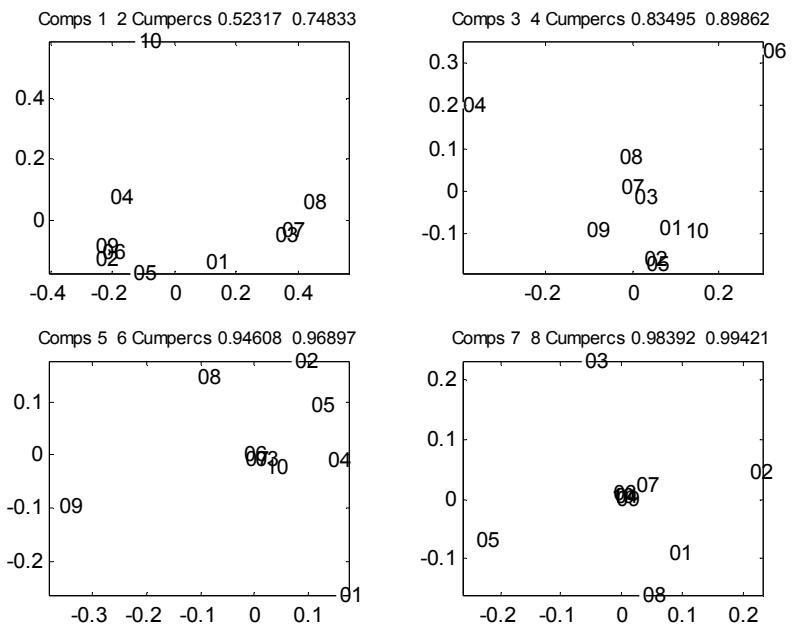
Cluster 1: 1 3 7 8



Cluster 2: 2 5 9 (that means drugs 2, 5, 9; please do not confound with the number of rows in the 3% reduced matrix, which happens by chance to be also 259!)



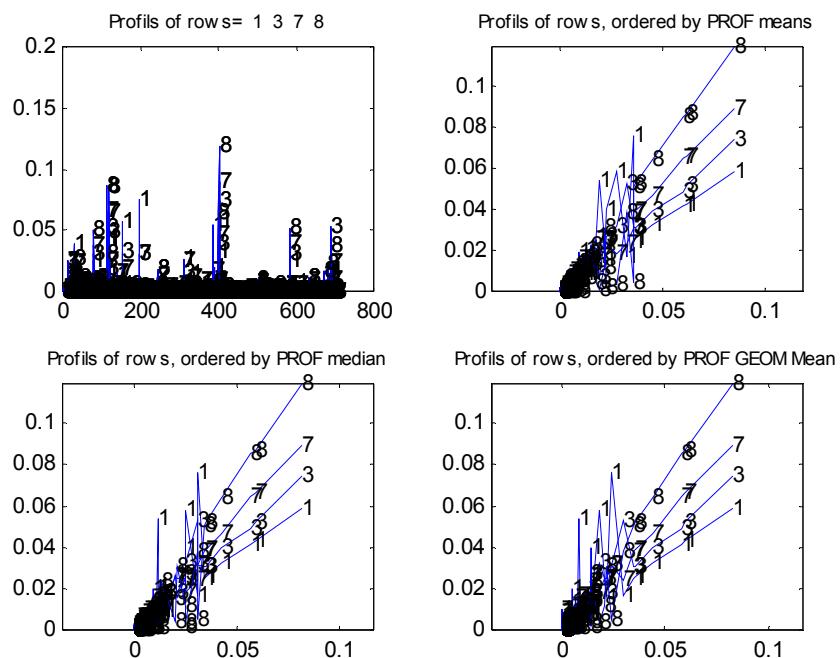
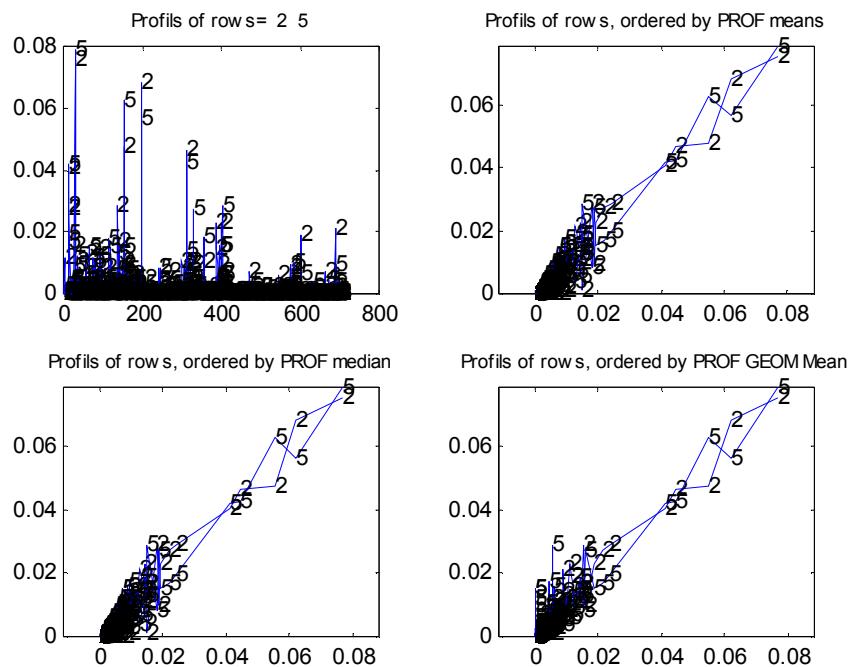
Confirmatory PLOTS. The first plot, for Components 1 2, is sufficient.

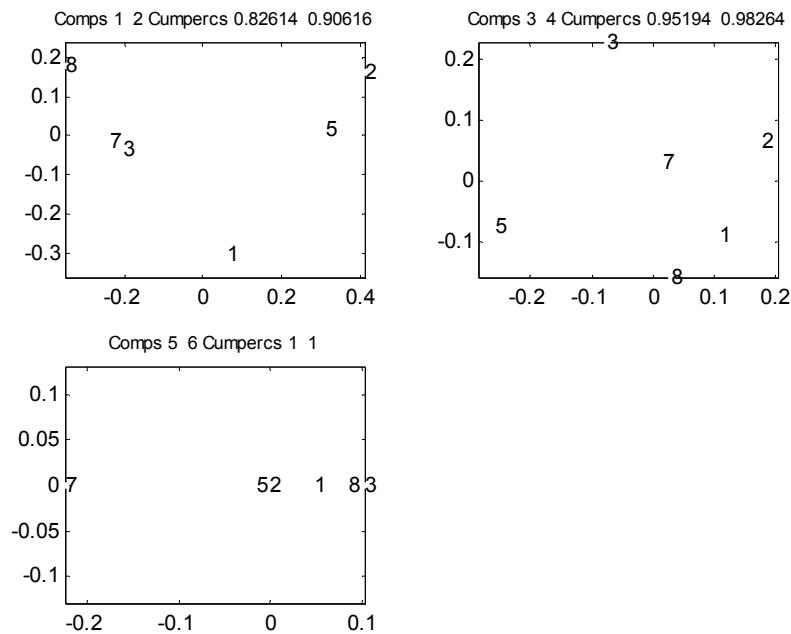


DATA SET 700 x 6

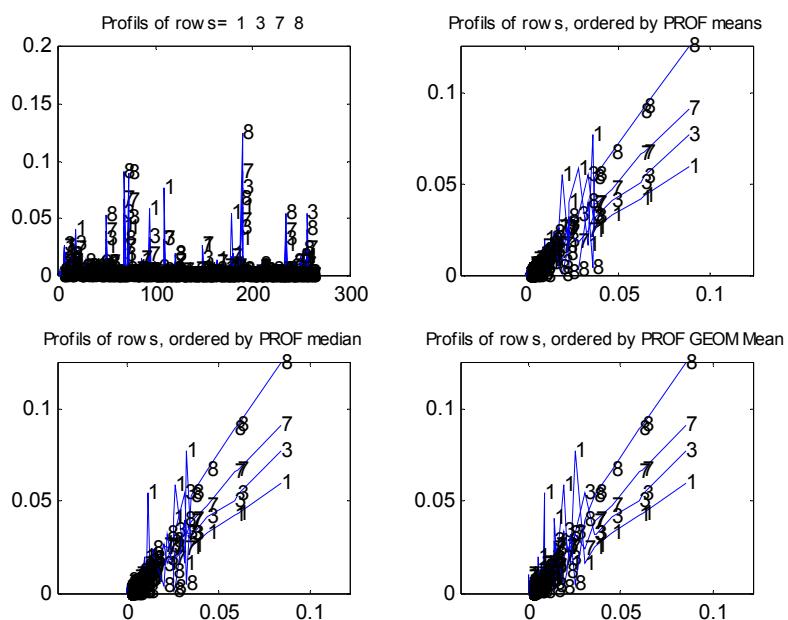
GAUGE = .42

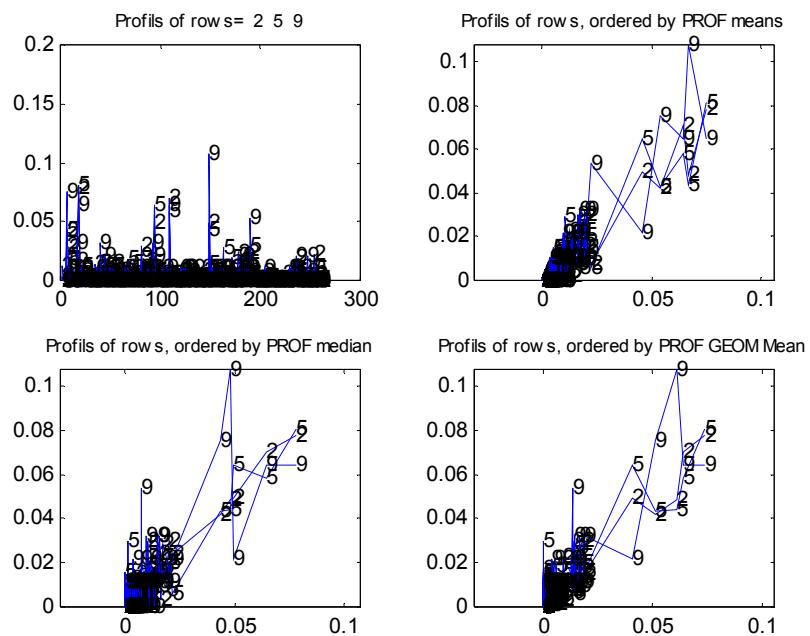
Cluster 1: 1 3 7 8

**Cluster 2: 2 5****Confirmatory PLOTS:**

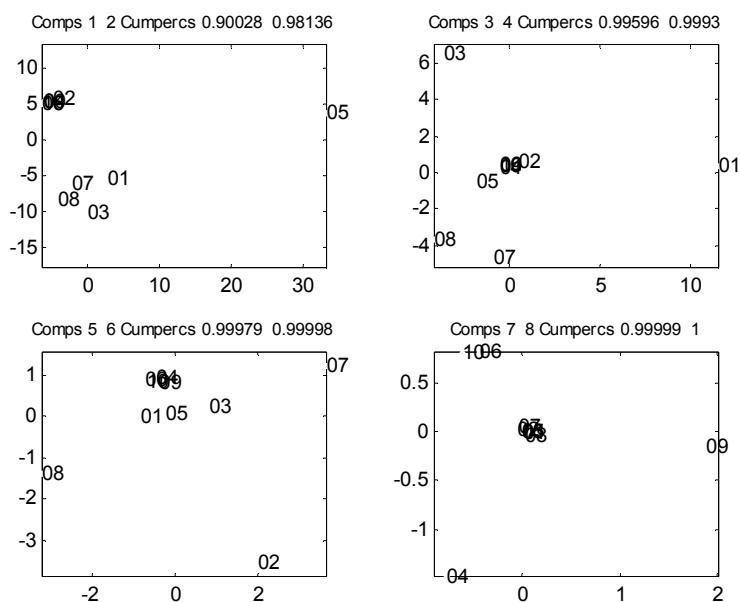
**DATA SET 259x 10**

GAUGE = .42

Cluster 1: 1 3 7 8**Cluster 2: 2 5 9**



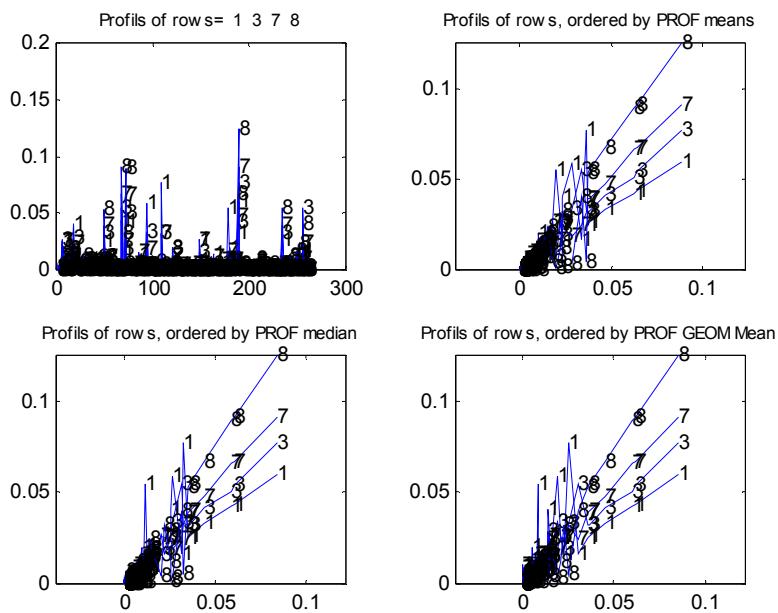
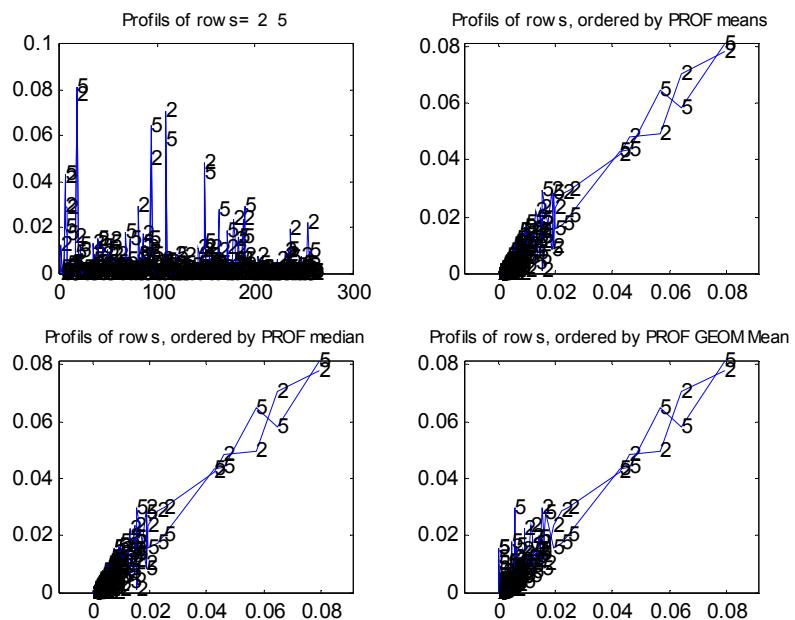
Confirmatory Plots:

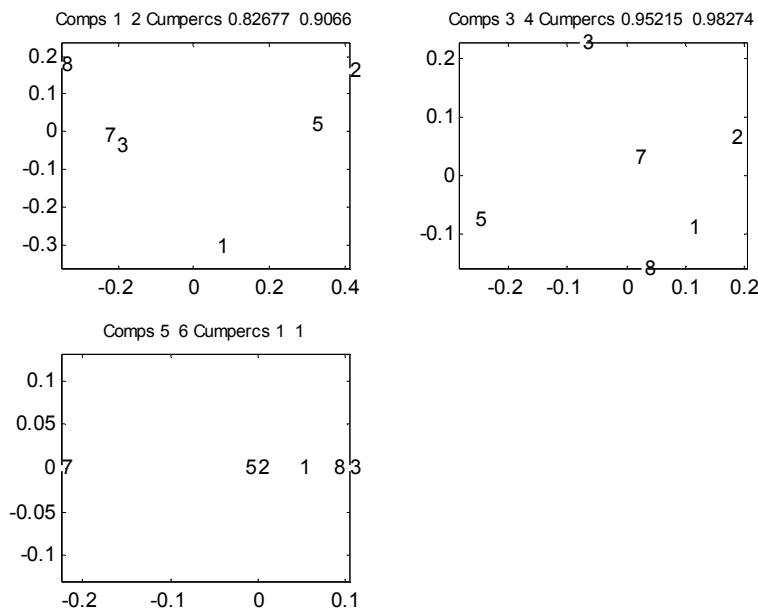


DATA SET 259x 6

GAUGE = .42

Cluster 1 = 1 3 7 8

**Cluster 2 = 2 5****Confirmatory Plots**



Conclusion. In this section 2.1, we applied the correlation clustering routine to the whole set 700x10 (all the 700 ADRs, all 10 drugs) and to the partial set 700x6 (all the 700 ADRs, 6 most reported drugs). The operation was repeated in both cases, on sets 259x10 and 259x6, obtained after reducing the corresponding data by 3% by taking away the ADRs having a too small contribution.

It results that the newly adopted correlation based clustering routine, yields in all 4 cases, for very similar gauges, the same two clusters 1, 3, 7, 8 and 2, 5(, 9) of drugs. This result differs from the subdivisions suggested by the parameters commonly adopted for their previous characterization. We will return on this point in the next Discussion Section.

2.2. VO8CB-superparamagnetic diagnostic imaging agents

Tables of the individual ADRs were not subjected to statistical evaluation due to their present small number of SOCD-ADRs. Their data have been already reported in Table 4, Section 1.3.

Discussion

The metal Gd³⁺ has 4f “buried”, 7 unpaired parallel spin electrons, with a magnetic moment of 7.94 BM, a property that is maintained in complexes, causing water protons around the contrast agent to relax quickly (relaxitivity parameter of each GBCA) thus enhancing the quality of the MRI scans. The products are considered stable enough, but the lanthanoid can be set free after an as yet not clearly defined time and unfavourable conditions in tissues, so that its toxicity can no longer be disregarded when *in vivo* increase of iron mobilization (See Viswamitra & Shah (2007)[14]), and Zn²⁺, Cu²⁺, and Ca²⁺ transmetallation become substantial. This is supported by

acute toxicity experimental trials, where despite a 50-fold range of LD50 values for different Gd-complexes, all become lethally toxic when the same quantity of Gd³⁺ is released [16] (See also Koop & al (1997) [16] for an example of enzymatic involvement; enzyme inhibition, Ca-blocking voltage channels and glutamate receptor and synaptic interferences of lanthanoids are long-standing issues). Ionic vs nonionic types, linear structures vs macrocyclic ring cores, osmolality, density/viscosity, and other physico-chemical properties (Cf [18]), aggregability and (serum) temperature dependency have been associated with immunogenic and chemotoxicity events and adverse effects, perhaps similarly differing to those of the various classes of some iodinated X-ray contrast agents. Nevertheless, the behaviours appear nonlinearly complex, and principal component multivariate analyses at the concentrations used *in vivo* are not conclusively elucidated. Transmetallation kinetics (Puttagunta & al, and Idée & al (1996)[18]) showed major differences among currently used MR-CBCAs, their equilibrium thermodynamic and selectivity ligand competition constants calculated *in vitro* (and in serum), that therefore do not explain the relative (pre-)equilibrium compartmentalization turnovers. Frenzel & al (2008)[18], measured the release of Gd³⁺ at the initial rate and after 15 days' incubation in human serum *in vitro* at 37°C, pH 7.4, and found that in the presence of additional 10 mmol/L phosphate precipitation – i.e. in a condition mimicking kidney insufficiency -, the initial Gd³⁺ concentration in native serum increased by 100% for nonionic and 12-30% for ionic linear GBCAs, but not for macrocyclic GBCAs, while only the Gd³⁺ concentrations of nonionic linear GBCAs remained increased (75%) at 15 days. It remains to be confirmed whether the macrocyclic chelates with high thermodynamic stability, if reinforced by ionicity, will minimize the amount of free Gd³⁺ released *in vivo* (Cf Port & al (2008)[18]. Nevertheless, our experience of the highly unpredictable instability even of the well-known, best purified protein or hydrocarbon polymers suggests the utmost caution in applying any statistical method to explain kinetics vs (thermo)dynamics in multiple, interacting native, living broths [19], which entails that our presentation in Table 6 may be somewhat incidental. Transient protein conformations, which have only recently been detected and characterized (i.e. [20]), promise to be of greater potential use than extended traditionally full QSARS studies (See References [47-61] in [21]).

Table 6. PHYSICO-CHEMICAL AND KINETIC “CONSTANTS” . Columns: 1) Meglumine Gadobenate, Gd-BOPTA (MultiHance R); 2) Gadobutrol, Gd-BT-DO3A (Gadovist R); 3) Gadodiamide, Gd-DTPA-BMA (Omniscan R); 4) Trisodium Gadofosveset, MS 325 (Vasovist R); 5) Meglumine Gadopentetate, Gd-DTPA (Magnevist R); 6) Meglumine Gadoterate, Gd-DOTA (Dotarem R); 7) Gadoteridol, Gd-HP-DO3A (ProHance R); 8) Gadoversetamide, Gd-DTPA-BMEA (OptiMARK R); 9) Disodium Gadoxetate, Gd-EOB-DTPA (Primovist R). Gadofosveset and Gadoxetate strongly bind reversibly to serum proteins, taken and excreted by liver; other mostly eliminated by glomerular filtration. Rows: 1) Molecular weight; 2) Dissociated particles per molecule; 3) – log P BuOH/H₂O; 4) Standard dose ev, mmol/kg; 5) Osmolality mOsm/kg H₂O at 37°C; 6) Viscosity mPa.s at 37°C; 7) Log K_{thermod}; 8) Log K_{conditional} at pH 7.4, 37°C; 9) Dissociation rate in 0.1 M HCl (sec⁻¹); 10) Half-life (h, in normal volunteers); 11) Excess free ligand (percentage of the molar concentration of Gd-chelate); 12) Osmotic load (mOsm/l) : {[dose(mmol/kg)x70] / V_{distribution} (l)}x number of dissociated ions. Values calculated on the assumption that the agents distribute homogenously in the interstitial space (10.5 l for a patient

weighing 70 kg). Asterisks indicate averaged values from Frenzel & al (2008), Mark & al (2008)[18], and The London Pharmaceutical Press' Martindale Pharmacopoeia online edition (2010).

	1	2	3	4	5	6	7	8	9
1	1,058.2	604.3	582.6*	975.9	938.5	753.9	558.7	661.8	725.0
2	3	1	1	4	3	2	1	1	3
3	2.33	2.00	2.13	2.11	3.16	2.87	1.98	x	2.11
4	0.1	0.1	0.1	0.03	0.1	0.1	0.1	0.1	0.025
5	1,970	1,603	789.5*	825	1,950*	1,350	630	1,110	688
6	5.3	4.96	1.4	1.95*	2.9	2.0	1.3	2.0	1.19
7	22.6	21.8	16.9	22.1	22.3	25.6	23.8	16.7	23.5
8	18.4	14.9*	14.9	18.9	18.5	19.3	17.2	15.0	18.7
9	x	2.8×10^{-6}	2.0×10^{-2}	x	1.2×10^{-3}	8.4×10^{-7}	6.4×10^{-5}	2.2×10^{-2}	x
10	1.59*	1.5	1.3	2.5	1.5	1.5	1.57	1.73	0.95
11	0.0	0.1	5.0	0.1	0.1	0.0	0.1	10.0	0.5
12	2.00	0.67	0.67	0.80	2.00	1.33	0.67	0.67	0.50

We intend to attempt in the future to obtain a model representing a unified description of these physico-chemical and kinetic "constants".

An intriguing related problem, and one not involving only to the widely different cost of any new (rational) product choices, is the one first discussed by Elmståhl, whereby there is no contraindication to the adoption of relatively old iodinated contrast agents: indeed, the dogma that Gd-based media are less nephrotoxic than iodine agents is being discussed as a misconception (Cf Nyman & al (2007) [22]. The Katzberg and Newhouse (2010) Editorial, following the Rao and Newhouse (2006) line, such as the contributions of Solomon (2005) and others ([6], [22]) seriously calls for a general comparison of all SOCDs & ADRs collected and analysed, also with a view to identifying potentially more cost-effective agent(s) to replace both iodinated and Gd-based diagnostic procedures. This can be the subject of our next contribution, extended to all intravenous contrast media in use, following the first innovative presentation of Sharma's 2008 review [23].

Finally, it may be convenient to make here some new observations on the need for improving the Uppsala collaborative programme developed by the WHO:

- a) there are no data from the various Countries regarding the size of treated patient populations or their conditions, including emerging ones, and/or mean data, as previously noted [17], even though this requires standardizable verification of compliances: only then could our studies be considered as involving the general exposed population of participating Countries, not their specific physiopathology groups or any treated person;
- b) there is little information on the date of product introduction into clinical research, or at least the mean duration of such use, as well as the dates when the individual products (and/or their variants, equivalent salts, etc) were approved for clinical use in each Country. This prevents separation and comparison of trends, for instance between the two 20-year periods we addresses, which was previously feasible. Hence the need for agreeing on and repeating well-established statistical procedures, proposed here, as in our first example, and for studying their exploratory kinetics;
- c) it would be useful to introduce verification and updating of new pathological conditions, maybe simultaneous to the publication of WHO Technical Reports (e.g. CIN and NSF, which are not yet reported in the presented data and cited Tables. For these new syndromes and chronic pathological entities, properly finalized analytical programmes are already in progress);
- d) a long overdue issue is the resolution, or at least the addressing, of the problems relating to reporting immediacy, “suspicion, early alarm”, and the necessary analytical verifications (at the central, peripheral, regional, and/or national level or, in case of failed, inappropriate or delayed implementation, at the local level) using pre-established and up-to-date criteria, to be submitted for approval by the annual meetings of the representatives of participating Countries, and involving appropriately followed up, explicitly open, patient cohorts of volunteers;
- e) explicit reference to other existing data banks for a range of information including exploratory, representative, ordinative, administrative and scientific (confirmed) analytical data should also be made (i.e., the recently presented new connections regarding outstanding global nutrition problems and health systems (Cf [24]) that variously contribute to environment and disease risks (Cf [25]);
- f) an *ad hoc* (voluntary) drug recall programme should be implemented, at least for alarming or new suspected reactions and/or for those syndromes that emerge from previous ADRs (Cf [10], in Bradu & Rossini [17], p 748).

In commenting on the scientific and social philosophy of our unique, collaborative, global WHO programme, we have previously referred to the need for a systematic review process in healthcare (Cf [5], and [11] in [17]). Here, we also take the opportunity to stress the need for participating in, and extend, the so-called open mHealth Architecture [26], based on collaborative, no-barrier, spontaneous, voluntary work, which has the potential to advance clinical care and pharmacotoxicological drug research on a scale and resolution that has never been possible before.

Appendix Nr 1. V08CA paramagnetic diagnostic imaging agents. ADRs data of PR-22-2010 file of the n 10 products monitored.

For each product the total number of ADRs (in bold, in brackets) are listed, then the frequencies in rising order as aggregated in the WHO-standardized SOCDs, numbered in increasing order, their codes and total numbers per class (in bold, in brackets). The total number of the ADRs reported in the first 40 years is 38,296.

1-Gadobenic acid (n 5,381): 1-100 (n 862): (Hyperkeratosis (0966): 1; Skin reaction localized (1,650): 1; Papilloma (1,486): 1; Dermatitis (0007): 1; Skin depigmentation (0035): 1; Scleroderma (0971): 2; Skin atrophy (0034): 2; Rash pustular (0032): 2; Pigmentation abnormal (0973): 2; Skin necrosis (0060): 3; Urticaria acute (0045): 3; Skin nodule (0061): 5; Skin ulceration (0041): 5; Skin cold clammy (0932): 7; Bullous eruption (0871): 9; Dermatitis exfoliative (0008): 11; Skin exfoliation (1,199): 12; Skin dry (1,123): 14; Angioedema (0003): 24; Skin disorder (0037): 24; Rash macula-papular (0030): 27; Induration (1,891): 30; Skin discolouration (0036): 35; Sweating increased (0043): 41; Rash (0027): 50; Fibrosis skin (2,314): 88; Rash erythematous (0028): 112; Pruritus (0024): 135; Urticaria (0044): 214); **2-200 (n 192):** (Ligament disorder (2,086): 1; Arthropathy (0065): 1; Osteomyelitis (1,184): 1; Fracture pathological (0069): 1; Arthritis infective (2,024): 1; Musculoskeletal pain (1,889): 1; Muscle atrophy (0072): 2; Tendon disorder (1,074): 3; Myopathy (0074): 6; Arthritis (0064): 8; Arthralgia (0063): 16; Skeletal pain (1,347): 18; Muscle weakness (1,128): 27; Myalgia (0073): 28; Arthrosis (0066): 28; Deformity (2,209): 50); **4-410 (n 530)** (Hyperaesthesia (0113): 1; Hyperkinesia (0114): 1; Aphasia (0087): 1; Vocal cord paralysis (0942): 1; Brainstem disorder (0810): 1; EEG abnormal (0104): 1; Neuralgia (0124): 1; Choreoathetosis (0090): 1; Polyneuropathy (2,082): 1; Tongue paralysis (0153): 1; Spinal stenosis (1,975): 1; Dystonia (0068): 2; Encephalopathy (0105): 2; Sensory disturbance (0148): 2; Faecal incontinence (0107): 2; Ataxia (0088): 3; Muscle contractions involuntary (0155): 3; Migraine (0121): 3; Neuropathy peripheral (1,313): 5; Speech disorder (0150): 5; Oculogyric crisis (0132): 6; Convulsions (0093): 11; Dysphonia (0103): 12; Stupor (0151): 12; Convulsions grand mal (0095): 14; Dyskinesia (0102): 16; Tremor (0154): 17; Headache (0109): 23; Gait abnormal (0108): 24; Hypertonia (0116): 25; Dysaesthesia (1,491): 25; Hypoaesthesia (0117): 25; Coma (0091): 41; Dizziness (0101): 53; Paraesthesia (0137): 56; Hypokinesia (0118): 132); **6-431 (n 53):** (Fixed pupils (1,605): 1; Diplopia (0241): 1; Scleritis (0255): 1; Photophobia (0250): 1; Muscae volitantes (1,977): 2; Eye abnormality (0243): 3; Vision abnormal (0257): 7; Lacrimation abnormal (1,049): 17; Conjunctivitis (0238): 20); **7-432 (n 1):** Ear disorder NOS (1,255): 1); **8-433 (n 16):** (Taste loss (0266): 1; Parosmia (0265): 2; Taste perversion (0267): 13); **9-500 (n 599):** (Aggressive reaction (0162): 1; Hallucination (0179): 1; Personality disorder (0192): 1; Catatonic reaction (0169): 1; Anorexia (0165): 2; Somnolence (0197): 4; Mental disorder (1,944): 4; Insomnia (0183): 5; Nervousness (0188): 6; Depression (0172): 7; Confusion (0092): 7; Agitation (0163): 10; Depersonalization (0171): 11; Apathy (0167): 85; Emotional lability (0177): 224; Anxiety (0166): 230); **10-600 (n 792):** (Increased stool urgency (1,843): 1; Haematemesis (0297): 1; Constipation (0204): 1; Flatulence (0285): 1; Pancreatitis (0314): 1; Amylase increase (1,101): 1; Tongue disorder (0330): 2; Saliva increase (0222): 2; Intestinal ischaemia (1,308): 2; Mouth dry (0218): 4; Cheilitis (0270): 5; Mucositis NOS (1,351): 5; Dyspepsia (0279): 5; Dysphagia (0280): 7; Diarrhoea (0205): 7; Tongue oedema

(0331): 9; Abdominal pain (0268): 16; Vomiting (0228): 312; Nausea (0308): 410); **11-700 (n 6)** (Hepatic function abnormal (0348): 1; Bilirubinaemia (0339): 1; Hepatic necrosis (0349): 1; Hepatic enzymes increase (1,346): 1; Jaundice (0356): 2); **12-800 (n 12):** (Hyperglycaemia (0382): 1; Cachexia (0368): 1; Weight decrease (0407): 1; Phosphatase alkaline increase (0404): 1; Glycosuria (0377): 1; Troponin tincreased (2,090): 1; Acidosis lactic (0364): 2; Calcinosis (0369): 2; Oedema pharynx (1,395) :4); **13-900 (n 1):** (Adrenal insufficiency (0410): 1; **14-1,010 (n149):** (Cardio respiratory failure (1899): 1; Hypotension postural (0213): 1; Cardiomegaly (1,320): 1; Blood pressure fluctuation (1,762): 2; Hypertension pulmonary (0211):2; Cardiac failure (0496): 2; Heart disorder (0504): 3; Pulse weak (1,401): 9; Cyanosis (0501): 12; Circulatory failure (0499):14; Hypertension (0210): 30; Hypotension (0212): 72); **15-1,020 (n 10):** (Coronary artery disorder (0426): 1; Fibrosis endocardial (1,274): 2; Angina pectoris (0422): 3; Fibrosis myocardial (1,188): 4); **16-1,030 (n 79):** (AV block (0431): 1; AV block complete (1,378): 1; Arrhythmia nodal (0809): 1; Extrasystoles (0438): 1; Arrhythmia (0433): 7; Palpitation (0221): 7; Bradycardia (0208): 10; Cardiac arrest (0437): 20; Tachycardia (0224): 31); **17-1,040 (n 48):** (Stenosis vein (2,083): 1; Cerebral haemorrhage (0444): 1; Peripheral ischaemia (0454): 1; Vasodilatation (0225): 1; Thrombophlebitis deep (0470): 1; Capillary leak syndrome (1,835): 1; Thrombophlebitis superficial (0479): 1; Phlebitis (0455): 1; Transient ischaemic attack (1,694): 1; Vein disorder (0492): 2; Thrombophlebitis (0466): 3; Flushing (0207): 34); **18-1,100 (n 414):** (Apnoea (0507): 1; Hypoventilation (0518): 1; Sputum increase (0541): 1; Asthma (1,367): 1; Bradypnoea (0510): 1; Pulmonary congestion (1,721): 1; Chronic obstructive airways disease (1,493): 1; Pulmonary infiltration (1,038): 1; Aspiration (1,030): 1; Haemoptysis (0516): 1; Pleural fibrosis(0525): 1; Stridor (0542): 2; Epistaxis (0515): 2; Pneumonia (0528): 2; Pulmonary fibrosis(0532): 2; Laryngismus (0520): 3; Respiratory disorder (0536): 3; Pulmonary disorders (2,032): 4; Hyperventilation (0517): 4; Pharyngitis (0523): 5; Hypoxia (0519): 5; Sinusitis (0540): 5; Pulmonary oedema (0535): 5; Respiratory insufficiency (0537): 6; Respiratory depression (0144): 11; Bronchospasm (0511): 14; Larynx oedema (0522): 16; Laryngitis (0521): 19; Throattightness (1,489): 33; Coughing (0513): 45; Rhinitis (0539): 75; Dyspnoea (0514): 142); **20-1,220 (n 3):** (Leukocytosis (0576): 1; Leucopenia (0908): 1; Lymphoedema (0581): 1); **21-1,230 (n 12):** (Prothrombin decreased (0590): 1; Thrombocytopenia (0594): 1; Haematoma (1,353): 1; Thrombosis arterial (0482): 1; Thrombus intracardiac (2,113): 1; Thrombosis arterio-venous fistula (1,776): 1; Purpura (0459): 3; Embolism pulmonary (0451): 3); **22-1,300 (n 57):** (Micturition urgency (1,497): 1; Urinary tract stenosis (2,317): 1; Nephrosis (0610): 1; Renal failure acute (0618):2; Azotaemia (2,328):3; Renal failure chronic (2,329): 4; Renal function abnormal (0619): 5; Urinary incontinence (0156): 5; Face oedema (0602): 35]; **23-1,410 (n 2):** (Prostatic disorder (0632): 1; Testicular pain (1,500): 1); **25-1,500 (n 1)** (Eye malformation (0689): 1); **27- 1,700 (n 51):** (Histiocytoma (2,046): 1; Bladder carcinoma (0766): 1; Hyperhaemoglobinaemia (0928): 1; Breast neoplasm benign female (1,114): 1; Skin hypertrophy (0038): 47); **28-1,810 (n 1,399):** (Drug hypersensitivity syndrome (2,309): 1; Posture abnormal (2,012): 1; Death (0722): 1; Withdrawal syndrome (0200): 1; Crying abnormal (1,162): 1; Medicine ineffective (1,948): 1; Night sweats (1,898): 1; Multiple organ failure (1,819): 1; Drug interaction (2,356): 2; Allergy (1,058): 3; Choking (1,460): 3; Fever (0725): 5; Back pain (0717): 6; Pallor (0220): 7; Fatigue (0724): 9; Rigors (0731): 11; Oedema mouth (1,485): 13; Oedema generalized (0400): 13; Oedema periorbital (1009): 16; Asthenia (0716): 20; Oedema (0398): 22;

Syncope (0223): 23; Chest pain (0718): 36; Temperature changed sensation (1,705): 36; Anaphylactic shock (0713): 40; Oedema peripheral (0401): 48; Anaphylactic reaction (2,237): 54; Anaphylactoid reaction (0714): 105; Scar (1,522): 138; Malaise (0728): 174; Allergic reaction (0712): 291; Pain (0730): 316); **29-1,820 (n 40):** (Infusion site rash (2,136): 1; Medical device complication (2,139): 1; Application site reaction (0047): 1; Injection site bleeding (1,752): 2; Cellulitis (1,372): 2; Infusion site reaction (2,137): 3; Injection site inflammation (0054): 4; Injection site pain (0057): 7; Injection site rash (1,881): 7; Injection site reaction (0058): 12); **30-1,830 (n 50):** (Infection staphylococcal (1,867): 1; Infection susceptibility increased (1,226): 1; Infection (0736): 1; Abscess (0887): 1; Sepsis (0744): 2; Skin tightness (2,098): 44. **2-Gadobutrol (n 837): 1-100 (n 189):** (Acne (0001): 1; Rash psoriasisiform (0031): 1; Bullous eruption (0871): 1; Scleroderma (0971): 1; Erythema multiforme (0014): 1; Skin cold clammy (0932): 1; Dermatitis (0007): 1; Skin discolouration (0036): 1; Skin reaction localised (1,650): 1; Skin necrosis (0060): 1; Rash maculo-papular (0030): 2; Fibrosis skin (2,314): 3; Rash pustular (0032): 3; Skin disorder (0037): 4; Angioedema (0003): 10; Sweating increased (0043): 13; Rash erythematous (0028): 23; Rash (0027): 24; Pruritus (0024): 34; Urticaria (0044): 63); **2-200 (n 6):** (Arthrosis (0066): 1; Arthralgia (0063): 1; Muscle weakness (1,128): 2; Myalgia (0073): 2); **4-410 (n 91):** (Hypokinesia (0118): 1; Hyperkinesia (0114): 1; Sensory disturbance (0148): 1; Tetany (0152): 1; Dystonia (0068): 1; Neurologic disorder NOS (2133): 1; Cramps legs (0939): 1; Oedema cerebral (0891): 1; Encephalopathy (0105): 1; Ptosis (0142): 1; Vertigo (0158): 2; Convulsions grand mal (0095): 2; Muscle contractions involuntary (0155): 3; Stupor (0151): 3; Hypoaesthesia (0117): 4; Dysphonia (0103): 4; Headache (0109): 7; Dysaesthesia (1,491): 7; Tremor (0154): 7; Convulsions (0093): 7; Coma (0091): 11; Paraesthesia (0137): 12; Dizziness (0101): 12); **6-431 (n 10):** (Lacrimation abnormal (1049): 1; Chromatopsia (0237): 1; Mydriasis (0219): 1; Conjunctivitis (0238): 3; Vision abnormal (0257): 4); **7-432 (n 3):** (Hearing decreased (1368): 1; Ear disorder NOS (1,255): 1; Tinnitus (0264): 1); **8-433 (n 3):** (Taste loss (0266): 1; Taste perversion (0267): 2); **9-500 (n 9):** (Hallucination (0179): 1; Amnesia (0164): 1; Somnolence (0197): 1; Insomnia (0183): 1; Anxiety (0166): 1; Sleep disorder (0195): 1; Agitation (0163): 3); **10-600 (n 129):** (Flatulence (0285): 1; Gastric ulcer (0287): 1; Constipation (0204): 1; Stomatitis (0327): 1; Dyspepsia (0279): 2; Mouth dry (0218): 2; Diarrhoea (0205): 3; Dysphagia (0280): 3; Cheilitis (0270): 4; Tongue oedema (0331): 4; Abdominal pain (0268): 5; Mucositis NOS (1,351): 5; Vomiting (0228): 40; Nausea (0308): 57); **11-700 (n 1):** (Hepatocellular damage (0353): 1); **12-800 (n 3):** (Glucose tolerance abnormal (0376): 1; Oedema pharynx (1,395): 2); **14-1,010 (n 43):** (Cardiac failure left (0497): 1; Blood pressure fluctuation (1,762): 1; Hypertension (0210): 5; Cardiovascular disorders (2,031): 6; Cyanosis (0501): 7; Circulatory failure (0499): 9; Hypotension (0212): 14); **15-1,020 (n 3):** (Myocardial ischaemia (0429): 1; Angina pectoris (0422): 2); **16-1,030 (n 21):** (Arrhythmia (0433): 2; Palpitation (0221): 2; Bradycardia (0208): 3; Cardiac arrest (0437): 6; Tachycardia (0224): 8); **17-1,040 (n 28):** (Peripheral ischaemia (0454): 1; Cerebrovascular disorder (0445): 1; Vasculitis (0085): 1; Vein pain (0494): 1; Flushing (0207): 24); **18-1,100 (n 111):** (Pneumonia (0528): 1; Alveolitis allergic (1,019): 1; Hypoxia (0519): 1; Pulmonary disorders (2,032): 2; Respiratory insufficiency (0537): 2; Stridor (0542): 2; Pharyngitis (0523): 3; Respiratory disorder (0536): 3; Pulmonary oedema (0535): 4; Laryngitis (0521): 6; Throat tightness (1,489): 6; Respiratory depression (0144): 7; Rhinitis (0539): 8; Bronchospasm (0511): 8; Larynx oedema (0522): 9; Coughing (0513): 9; Dyspnoea (0514): 39); **19-1,210 (n 1):** (Anaemia (0544): 1); **20-**

1,220 (n 2): (Granulocytopenia (0572): 1; Leucopenia (0908): 1); **21-1,230 (n 2):** (Embolism pulmonary (0451): 1; Thrombocytopenia (0594): 1); **22-1,300 (n 19):** (Nephropathy toxic (0609): 1; Oliguria (0612): 1; Azotaemia (2,328): 1; Renal failure acute (0618): 1; Anuria (0596): 1; Urinary retention (0157): 1; Renal function abnormal (0619): 1; Creatinine clearance decreased (0598): 1; Renal pain (0621): 2; Face oedema (0602): 9); **24-1,420 (n 1):** (Vaginal discomfort (1,505): 1); **28- 1,810 (n 160):** (Choking (1,460): 1; Halitosis (0990): 1; Asthenia (0716): 1; Multiple organ failure (1,819): 1; Pain (0730): 1; Oedema generalised (0400): 1; Leg pain (1,439): 2; Chest pain (0718): 2; Drug level increased (1,281): 2; Back pain (0717): 3; Oedema peripheral (0401): 3; Fatigue (0724): 3; Fever (0725): 5; Oedema periorbital (1,009): 6; Rigors (0731): 6; Pallor (0220): 6; Oedema (0398): 7; Oedema mouth (1,485): 8; Anaphylactoid reaction (0714): 8; Syncope (0223): 9; Anaphylactic shock (0713): 12; Temperature changed sensation (1,705): 16; Anaphylactic reaction (2,237): 18; Malaise (0728): 19; Allergic reaction (0712): 19); **29-1,820 (n 2)** (Injection site necrosis (0056): 1; Injection site pain (0057): 1). **3-Gadodiamide (n 5,434): 1-100 (n 1,073):** (Acne (0001): 1; Papilloma (1,486): 1; Photosensitivity reaction (0022): 1; Livedo reticularis (1,410): 1; Skin depigmentation (0035): 1; Nail disorder (0020): 1; Dermatitis herpetiformis (1,549): 1; Skin reaction localised (1,650): 1; Erythema induratum (0912): 1; Psoriasis (1,398): 1; Dermatitis contact (0049): 1; Rash psoriaform (0031): 1; Epidermal necrolysis (0013): 1; Skin cold clammy (0932): 2; Rash pustular (0032): 2; Hyperkeratosis (0966): 3; Bullous eruption (0871): 4; Skin necrosis (0060): 4; Dermatitis (0007): 4; Skin atrophy (0034): 5; Alopecia (0002): 5; Scleroderma (0971): 5; Pigmentation abnormal (0973): 6; Eczema (0012): 6; Angioedema (0003): 7; Skin nodule (0061): 7; Skin ulceration (0041): 10; Sweating increased (0043): 13; Dermatitis exfoliative (0008): 14; Skin exfoliation (1,199): 22; Skin dry (1,123): 27; Rash maculo-papular (0030): 33; Skin disorder (0037): 47; Skin discolouration (0036): 63; Induration (1,891): 63; Rash erythematous (0028): 64; Rash (0027): 75; Pruritus (0024): 136; Urticaria (0044): 147; Fibrosis skin (2,314): 286); **2-200 (n 330):** (Ligament disorder (2,086): 1; Fracture pathological (0069): 1; Fasciitis necrotising (1,746): 1; Bone disorder (0067): 1; Osteomyelitis (1,184): 1; Avascular necrosis bone (2,222): 1; Fasciitis (1,707): 1; Osteitis (1,882): 1; Synovitis (0864): 2; Tendon disorder (1,074): 3; Fracture (2,190): 3; Musculoskeletal pain (1,889): 5; Myositis (0748): 5; Myopathy (0074): 5; Muscle atrophy (0072): 6; Rhabdomyolysis (1,210): 8; Arthritis (0064): 13; Arthropathy (0065): 14; Skeletal pain (1,347): 17; Arthralgia (0063): 38; Arthrosis (0066): 39; Muscle weakness (1,128): 44; Myalgia (0073): 46; Deformity (2,209): 74); **3-300 (n 10):** (Auto-antibody response (1,096): 1; Collagenosis (1,077): 3; Antinuclear factor test positive (1,082): 3; LE syndrome (0081): 3); **4-410 (n 593):** (Oculogyric crisis (0132): 1; Vocal cord paralysis (0942): 1; Optic ischaemic neuropathy (1,978): 1; Hydrocephalus (0692): 1; Optic neuritis (0136): 1; Neuralgia (0124): 1; Ptosis (0142): 1; Migraine (0121): 1; Spinal stenosis (1,975): 1; Cognitive disorders (1,877): 1; Trigeminal disorders (2,169): 1; Meningism (0120): 2; Vertigo (0158): 2; Neuropathy (0130): 2; Hemiparesis (0111): 2; Tongue paralysis (0153): 2; Hyperesthesia (0113): 2; Paresis (0141): 2; CSF abnormal (0098): 2; Coordination abnormal (0097): 3; Hyperkinesia (0114): 3; Muscle contractions involuntary (0155): 3; Stupor (0151): 3; Speech disorder (0150): 3; Paralysis (0138): 4; Ataxia (0088): 4; Neurologic disorder NOS (2,133): 5; Aphasia (0087): 5; Coma (0091): 5; Sensory disturbance (0148): 6; Neuropathy peripheral (1,313): 8; Dysphonia (0103): 10; Tremor (0154): 11; Convulsions (0093): 12; Dysaesthesia (1,491): 19; Convulsions grand mal (0095): 21; Dyskinesia

(0102): 22; Hypoaesthesia (0117): 26; Headache (0109): 33; Hypertonia (0116): 39; Dizziness (0101): 39; Gait abnormal (0108): 55; Paraesthesia (0137): 61; Hypokinesia (0118): 166); **6-431 (n 43):** (Eye muscle paralysis (1,429): 1; Diplopia (0241): 1; Lacrimation abnormal (1,049): 1; Keratitis (0246): 1; Eye pain (0244): 2; Blindness (0232): 2; Eye abnormality (0243): 2; Photophobia (0250): 2; Vision abnormal (0257): 11; Conjunctivitis (0238): 20); **7-432 (n 6):** (Hearing decreased (1,368): 1; Hyperacusis (0261): 1; Tinnitus (0264): 1; Deafness (0258): 3); **8-433 (n 39):** (Taste loss (0266): 5; Taste perversion (0267): 34); **9-500 (n 735):** (Communication disorder (1,970): 1; Suicide ideation (2,363): 1; Drug abuse (0175): 1; Personality disorder (0192): 1; Catatonic reaction (0169): 2; Depersonalization (0171): 4; Aggressive reaction (0162): 4; Somnolence (0197): 4; Nervousness (0188): 4; Anorexia (0165): 5; Amnesia (0164): 5; Agitation (0163): 6; Mental disorder (1,944): 6; Hallucination (0179): 9; Confusion (0092): 10; Insomnia (0183): 14; Depression (0172): 15; Apathy (0167): 98; Emotional lability (0177): 264; Anxiety (0166): 281); **10-600 (n 419):** (Haemorrhoids (0298): 1; Intestinal fistula (1,806): 1; Bowel motility disorder (1,842): 1; Intestinal gangrene (0301): 1; Haemorrhage rectum (1,014): 1; Stomatitis ulcerative (0328): 1; Diseases of oesophagus (1,059): 1; Diarrhoea, Clostridium difficile (1,201): 1; Gastric ulcer haemorrhagic perforated (0289): 1; Intestinal ischaemia (1,308): 1; Stomatitis (0327): 1; Melaena (0306): 1; GI haemorrhage (0294): 1; Oesophageal ulceration (0311): 1; Eruption (0283): 1; Oesophageal varices (1,036): 1; Constipation (0204): 2; Pancreatitis (0314): 2; Dyspepsia (0279): 2; Gastroenteritis (0293): 2; Saliva increased (0222): 4; Diarrhoea (0205): 8; Tongue oedema (0331): 8; Mouth dry (0218): 8; Dysphagia (0280): 9; Abdominal pain (0268): 13; Nausea (0308): 171; Vomiting (0228): 174); **11-700 (n 25):** (Cholelithiasis (0343): 1; Hepatitis viral (1,723): 1; SGPT increased (0360): 1; SGOT increased (0359): 1; Hepatic necrosis (0349): 2; Hepatic cirrhosis (0347): 2; Bilirubinaemia (0339): 2; Hepatitis cholestatic (0351): 2; Hepatic function abnormal (0348): 3; Hepatic enzymes increased (1,346): 3; Jaundice (0356): 7); **12-800 (n 39):** (Gout (0378): 1; Electrolyte abnormality (0374): 1; Acidosis lactic (0364): 1; Creatine phosphokinase increased (0791): 1; Hypokalaemia (0391): 1; Diabetic ulcer (2,015): 1; Hypophosphataemia (1,064): 1; Dehydration (0370): 1; LDH increased (0394): 1; Oedema pharynx (1,395): 1; Lipodystrophy (0830): 1; Hypercalcaemia (0380): 2; Acidosis (0363): 2; Hypoproteinaemia (0827): 2; Cachexia (0368): 3; Calcinosis (0369): 5; Weight decrease (0407): 6; Hypocalcaemia (0387): 8); **13-900 (n 7):** (Panniculitis (1,416): 1; Pituitary neoplasm benign (1,291): 1; Adrenal insufficiency (0410): 2; Hyperparathyroidism (0921): 3); **14-1,010 (n 79):** (ECG abnormal (0502): 1; Vascular graft occlusion (2,109): 1; Cardiovascular disorders (2,031): 1; Cyanosis (0501): 2; Hypotension postural (0213): 2; Hypertension pulmonary (0211): 3; Cardiomegaly (1,320): 4; Circulatory failure (0499): 4; Heart disorder (0504): 6; Cardiac failure (0496): 10; Hypertension (0210): 15; Hypotension (0212): 30); **15-1,020 (n 25):** (Aortic stenosis (0424): 1; Cardiomyopathy (0425): 1; Angina pectoris (0422): 1; Endocarditis (0427): 1; Fibrosis endocardial (1,274): 2; Heart valve disorders (1,228): 2; Myocardial infarction (0428): 2; Myocardial ischaemia (0429): 2; Coronary artery disorder (0426): 3; Pericarditis (0430): 3; Fibrosis myocardial (1,188): 7); **16-1,030 (n 56):** (AV block (0431): 1; AV block complete (1,378): 1; Extrasystoles (0438): 1; QT prolonged (1,361): 1; Arrhythmia nodal (0809): 2; Arrhythmia (0433): 2; Bradycardia (0208): 3; Tachycardia ventricular (0230): 3; Fibrillation atrial (0439): 5; Palpitation (0221): 9; Cardiac arrest (0437): 10; Tachycardia (0224): 18); **17-1,040 (n 72):** (Stenosis vein (2,083): 1; Arteriosclerosis (0771): 1; Thrombophlebitis (0466): 1; Cerebral

ischaemia (1,987): 1; Transient ischaemic attack (1,694): 1; Vein pain (0494): 1; Vasculitis (0085): 1; Phlebitis (0455): 1; Vein distended (0493): 1; Vein disorder (0492): 2; Gangrene (0911): 2; Thrombophlebitis deep (0470): 3; Cerebral haemorrhage (0444): 3; Cerebrovascular disorder (0445): 6; Peripheral ischaemia (0454): 6; Vasodilatation (0225): 18; Flushing (0207): 23); **18-1,100 (n 264):** (Pneumonitis (1,141): 1; Upper respiratory tract infection (0543): 1; Hypoxia (0519): 1; Sleep apnoea (1,515): 1; Bronchitis (0805): 1; Apnoea (0507): 1; Sinusitis (0540): 1; Atelectasis (1,197): 1; Hyperventilation (0517): 1; Pulmonary infiltration (1,038): 1; Pleural fibrosis (0525): 2; Respiratory depression (0144): 2; Asthma (1,367): 2; Pleural effusion (0524): 2; Pulmonary congestion (1,721): 3; Respiratory disorder (0536): 3; Laryngitis (0521): 3; Stridor (0542): 3; Pulmonary oedema (0535): 6; Pulmonary disorders (2032): 6; Pulmonary fibrosis (0532): 7; Laryngismus (0520): 7; Respiratory insufficiency (0537): 8; Bronchospasm (0511): 8; Throat tightness (1,489): 10; Pneumonia (0528): 11; Larynx oedema (0522): 14; Pharyngitis (0523): 17; Coughing (0513): 26; Rhinitis (0539): 32; Dyspnoea (0514): 82); **19-1,210 (n 25):** (Anaemia normocytic (0557): 1; Haemolysis (0560): 1; Haemosiderosis (1,427): 1; Serum iron increased (1,294): 2; Anaemia (0544): 4; Blood dyscrasia (1,946): 4; Iron metabolism disorder (0777): 4; Erythrocytes abnormal (1,251): 8); **20-1,220 (n 3):** (Lymphangitis (0580): 1; Lymphadenopathy (0577): 1; Lymphoedema (0581): 1); **21-1,230 (n 21):** (Haemorrhage NOS (0452): 1; Prothrombin decreased (0590): 1; Coagulation factor decreased (1,122): 1; Bleeding time increased (0584): 1; Thrombus intracardiac (2,113): 1; Haematoma (1,353): 1; Thrombosis (0481): 1; Thrombosis cerebral (0486): 1; Thrombosis arterio-venous fistula (1,776): 1; Embolism aortic (2,041): 2; Embolism cerebral (0448): 2; Embolism pulmonary (0451): 2; Thrombocytopenia (0594): 2; Purpura (0459): 4); **22-1,300 (n 77):** (Nephrosclerosis (1,177): 1; Nephrosis (0610): 1; Glomerulonephritis (0603): 1; Renal papillary necrosis (0622): 1; Urine abnormal (0629): 1; Urinary incontinence (0156): 1; Nephritis interstitial (0608): 1; Urinary tract stenosis (2,317): 1; Oliguria (0612): 2; Nephropathy toxic (0609): 2; Renal cyst (1,138): 2; Dysuria (0601): 2; Renal function abnormal (0619): 3; Renal tubular necrosis (0624): 6; Renal failure chronic (2,329): 11; Face oedema (0602): 13; Renal failure acute (0618): 14; Azotaemia (2,328): 14); **23-1,410 (n 2):** (Hernia inguinal (1,482): 1; Prostatic disorder (0632): 1); **24-1,420 (n 3):** (Menstrual disorder (0657): 1; Genital ulceration (1,387): 1; Oligohydramnios (1,432): 1); **25-1,500 (n 2):** (Drug exposure in pregnancy (2,221): 1; Foetal maturation impaired (0961): 1); **26-1,600 (n 1):** (Hypoplasia cerebellar (1,574): 1); **27-1,700 (n 85):** (Breast neoplasm benign female (1,114): 1; Bladder carcinoma (0766): 1; Histiocytoma (2,046): 1; Brain neoplasm NOS (1,862): 1; Skin hypertrophy (0038): 81); **28-1,810 (n 1,270):** (Influenza-like symptoms (1,222): 1; Wound drainage increased (1,715): 1; Allergy (1,058): 1; Hypovolaemia (0929): 1; Therapeutic response decreased (0878): 1; Therapeutic response increased (0874): 1; Drug level below therapeutic (2,172): 1; Choking (1,460): 1; ESR increased (0723): 1; Nasal polyp (0985): 1; C-reactive protein increased (2,351): 1; Posture abnormal (2,012): 1; Granulomatous lesion (0876): 1; Resistance (1,950): 1; Drug level increased (1,281): 1; Tenderness NOS (1,911): 1; Ascites (0715): 2; Sudden death (1,134): 2; Withdrawal syndrome (0200): 2; Night sweats (1,898): 2; Oedema mouth (1,485): 3; Multiple organ failure (1,819): 4; Condition aggravated (0965): 4; Pallor (0220): 5; Leg pain (1,439): 7; Oedema periorbital (1,009): 7; Medicine ineffective (1,948): 7; Death (0722): 7; Back pain (0717): 9; Anaphylactic reaction (2,237): 9; Temperature changed sensation (1,705): 9; Fever (0725): 13; Syncope (0223): 13; Rigors (0731): 13; Oedema generalised (0400): 20;

Anaphylactic shock (0713): 21; Fatigue (0724): 21; Oedema (0398): 31; Asthenia (0716): 33; Allergic reaction (0712): 36; Anaphylactoid reaction (0714): 45; Chest pain (0718): 45; Oedema peripheral (0401): 98; Scar (1,522): 168; Malaise (0728): 215; Pain (0730): 403); **29-1,820 (n 28):** (Infusion site reaction (2,137): 1; Injection site pruritus (1,880): 1; Injection site rash (1,881): 2; Injection site inflammation (0054): 5; Injection site pain (0057): 6; Injection site reaction (0058): 6; Cellulitis (1,372): 7); **30-1,830 (n 102):** (Infection fungal (0739): 1; Moniliasis (0741): 1; Infection (0736): 1; Infection bacterial (0738): 1; Infection viral (0740): 1; Infection susceptibility increased (1,226): 1; Abscess (0887): 2; Infection staphylococcal (1,867): 4; Sepsis (0744): 26; Skin tightness (2,098): 64). **5-Gadofosveset (n 63): 1-100 (n 5):** (Rash erythematous (0028): 1; Urticaria (0044): 1; Pruritus (0024): 3); **4-410 (n 10):** (Hypoesthesia (0117): 1; Dysphonia (0103): 1; Tremor (0154): 1; Stupor (0151): 1; Coma (0091): 2; Headache (0109): 2; Paraesthesia (0137): 2; Conjunctivitis (0238): 2); **9-600 (n 6):** (Ileus paralytic (0215): 1; Vomiting (0228): 1; Abdominal pain (0268): 1; Nausea (0308): 3); **14-1,010 (n 5):** (Circulatory failure (0499): 1; Hypotension (0212): 1; Pulse weak (1,401): 1; Cardiac failure (0496): 2); **15-1,020 (n 2):** (Myocardial infarction (0428): 2); **16-1,030 (n 5):** (Cardiac arrest (0437): 2; Tachycardia (0224): 3); **17-1,040 (n 3):** (Peripheral ischaemia (0454): 1; Flushing (0207): 2); **18-1,100 (n 14):** (Bronchospasm (0511): 1; Pulmonary congestion (1,721): 1; Rhinitis (0539): 3; Coughing (0513): 4; Dyspnoea (0514): 5); **22-1,300 (n 1):** (Urinary incontinence (0156): 1); **28-1,810 (n 9):** (Chest pain (0718): 1; Allergic reaction (0712): 1; Anaphylactoid reaction (0714): 1; Syncope (0223): 1; Tolerance decreased (0761): 1; Temperature changed sensation (1,705): 1; Malaise (0728): 3); **29-1,820 (n 1):** (Injection site pruritus (1,880): 1). **5-Gadopentetic acid (n 20,202): 1-100 (n 4,180):** (Acne (0001): 1; Onychomycosis (1,638): 1; Skin odor abnormal (0039): 1; Papilloma (1,486): 1; Furunculosis (0016): 1; Seborrhoea (0033): 1; Dermatitis lichenoid (0010): 1; Skin fragility (1,782): 1; Urticaria acute (0045): 2; Hypotrichosis (0828): 2; Dermatitis contact (0049): 2; Stevens Johnson syndrome (0042): 2; Skin depigmentation (0035): 2; Skin reaction localised (1,650): 3; Rash pustular (0032): 3; Erythema multiforme (0014): 3; Livedo reticularis (1,410): 3; Skin atrophy (0034): 3; Pigmentation abnormal (0973): 4; Eyelid skin disorder (2,253): 4; Skin necrosis (0060): 5; Dermatitis (0007): 6; Alopecia (0002): 7; Eczema (0012): 7; Skin cold clammy (0932): 8; Hyperkeratosis (0966): 8; Scleroderma (0971): 9; Skin nodule (0061): 15; Skin ulceration (0041): 17; Dermatitis exfoliative (0008): 18; Bullous eruption (0871): 28; Skin exfoliation (1,199): 29; Skin dry (1,123): 40; Angioedema (0003): 57; Induration (1,891): 74; Skin disorder (0037): 75; Rash maculo-papular (0030): 85; Skin discolouration (0036): 98; Sweating increased (0043): 185; Fibrosis skin (2,314): 189; Rash erythematous (0028): 344; Rash (0027): 399; Pruritus (0024): 847; Urticaria (0044): 1,589); **2-200 (n 402):** (Crepitations (1,922): 1; Fasciitis (1,707): 1; Chondrocalcinoses (2,228): 1; Osteoporosis (0076): 1; Bone disorder (0067): 1; Avascular necrosis bone (2,222): 1; Fracture pathological (0069): 1; Fasciitis plantar (1,558): 1; Arthritis infective (2,024): 2; Myositis (0748): 2; Ligament disorder (2,086): 2; Osteomyelitis (1,184): 2; Fracture (2,190): 3; Tendon disorder (1,074): 6; Myopathy (0074): 6; Muscle atrophy (0072): 7; Musculoskeletal pain (1,889): 8; Arthropathy (0065): 13; Skeletal pain (1,347): 23; Arthritis (0064): 24; Arthrosis (0066): 47; Muscle weakness (1,128): 50; Myalgia (0073): 57; Arthralgia (0063): 58; Deformity (2,209): 84); **3-300 (n 4):** (Graft versus host disease (1,770): 1; Collagenosis (1,077): 1; LE syndrome (0081): 2); **4-410 (n 2,088):** (Hyporeflexia (0850): 1; Spinal stenosis (1,975): 1; Meningism (0120): 1; CSF abnormal (0098):

1; Myasthenia gravis-like syndrome (1,063): 1; Encephalomyelitis (0974): 1; Myelitis (0123): 1; Hemiplegia (0112): 1; Nerve root lesion (1,104): 1; Convulsions aggravated (0094): 1; Neuritis (0125): 1; Extrapyramidal disorder (0106): 1; Oculomotor nerve paralysis (0133): 1; Dementia (0100): 1; Polyneuropathy (2,082): 1; Hyperkinesia (0114): 1; Reflexes abnormal (1,451): 1; Vocal cord paralysis (0942): 2; Meningitis (0955): 2; Demyelination (1,547): 2; Cerebral atrophy (1,181): 2; EEG abnormal (0104): 2; Cerebral disorder (1,960): 2; Neuralgia (0124): 2; Hypotonia (0119): 2; Neuropathy (0130): 2; Paresis (0141): 2; Blepharospasm (1,168): 2; Cognitive disorders (1,877): 3; Hemiparesis (0111): 3; Cramps legs (0939): 3; Hyperaesthesia (0113): 4; Faecal incontinence (0107): 4; Neurologic disorder NOS (2,133): 4; Tongue paralysis (0153): 4; Oedema cerebral (0891): 5; Nystagmus (0131): 5; Tetany (0152): 5; Dystonia (0068): 5; Coordination abnormal (0097): 6; Visual field defect (0159): 7; Oculogyric crisis (0132): 8; Aphasia (0087): 9; Paralysis (0138): 10; Migraine (0121): 10; Encephalopathy (0105): 10; Sensory disturbance (0148): 13; Ataxia (0088): 13; Vertigo (0158): 16; Muscle contractions involuntary (0155): 17; Neuropathy peripheral (1,313): 17; Dyskinesia (0102): 26; Speech disorder (0150): 37; Dysphonia (0103): 50; Stupor (0151): 54; Hypertonia (0116): 67; Gait abnormal (0108): 70; Convulsions (0093): 77; Dysaesthesia (1,491): 79; Hypoaesthesia (0117): 91; Convulsions grand mal (0095): 96; Tremor (0154): 97; Coma (0091): 121; Hypokinesia (0118): 211; Headache (0109): 238; Paraesthesia (0137): 254; Dizziness (0101): 300); **6-431 (n 329):** (Photopsia (1,172): 1; Conjunctival disorder (2,008): 1; Blindness temporary (1,280): 1; Lacrimal gland disorder (0216): 1; Keratoconjunctivitis (0247): 1; Photophobia (0250): 2; Mydriasis (0219): 2; Fixed pupils (1,605): 2; Corneal deposits (1,081): 2; Blindness (0232): 3; Eye abnormality (0243): 6; Diplopia (0241): 12; Eye pain (0244): 20; Vision abnormal (0257): 41; Lacrimation abnormal (1,049): 76; Conjunctivitis (0238): 158); **7-432 (n 26):** (Hearing decreased (1,368): 1; Vestibular disorder (1,126): 1; Hyperacusis (0261): 1; Deafness (0258): 4; Ear disorder NOS (1,255): 4; Ear ache (0260): 5; Tinnitus (0264): 10); **8-433 (n 101):** (Taste loss (0266): 3; Parosmia (0265): 6; Taste perversion (0267): 92); **9-500 (n 1,111):** (Intentional self-injury (2,364): 1; Manic reaction (0186): 1; Communication disorder (1,970): 1; Mental deficiency (0187): 1; Drug abuse (0175): 1; Psychosis (0193): 2; Paroniria (0191): 2; Personality disorder (0192): 2; Hallucination (0179): 3; Catatonic reaction (0169): 3; Hysteria (0180): 3; Delirium (0099): 4; Neurosis (0189): 5; Sleep disorder (0195): 6; Concentration impaired (1,127): 6; Anorexia (0165): 6; Thinking abnormal (0199): 7; Mental disorder (1,944): 10; Aggressive reaction (0162): 13; Insomnia (0183): 15; Amnesia (0164): 16; Depression (0172): 20; Nervousness (0188): 25; Depersonalization (0171): 42; Somnolence (0197): 45; Confusion (0092): 46; Agitation (0163): 49; Apathy (0167): 117; Emotional lability (0177): 302; Anxiety (0166): 357); **10-600 (n 2,887):** (Haemorrhoids (0298): 1; Haemorrhage intraabdominal (1,419): 1; Amylase increased (1,101): 1; Gastroenteritis (0293): 1; Haematemesis (0297): 1; Diverticula (1,908): 1; Hiccup (0300): 1; Enanthema (0281): 1; Increased stool frequency (1,844): 1; Eructation (0283): 1; Increased stool urgency (1,843): 1; Gastritis (0291): 1; Intestinal ischaemia (1,308): 1; Duodenitis (1,217): 1; Intestinal obstruction (0302): 1; Gastric dilatation (0286): 1; Irritable bowel syndrome (1,531): 1; Encopresis (2,162): 1; Melaena (0306): 1; Teeth-grinding (1,086): 1; Oesophageal ulceration (0311): 1; Tooth disorder (0336): 2; Glossitis (0295): 2; Gastro-intestinal disorder NOS (1,262): 2; Tenesmus (0231): 2; Intestinal gangrene (0301): 2; Diarrhoea, Clostridium difficile (1,201): 2; Stomatitis ulcerative (0328): 2;

Oesophagitis (0309): 2; GI haemorrhage (0294): 3; Flatulence (0285): 3; Gingivitis (1,083): 3; Tooth ache (1,376): 3; Tongue disorder (0330): 4; Pancreatitis (0314): 4; Gastroesophageal reflux (1,149): 5; Constipation (0204): 6; Stomatitis (0327): 6; Dyspepsia (0279): 10; Mucositis NOS (1,351): 13; Saliva increased (0222): 19; Cheilitis (0270): 28; Mouth dry (0218): 38; Diarrhoea (0205): 41; Tongue oedema (0331): 63; Abdominal pain (0268): 91; Dysphagia (0280): 104; Nausea (0308): 1,140; Vomiting (0228): 1,266; **11-700 (n 36):** (Gallbladder disorder (0345): 1; Gamma-GT increased (1,334): 1; Hepatic necrosis (0349): 1; Hepatic failure (0933): 1; Hepatic function abnormal (0348): 2; Hepatitis (0350): 2; Cholelithiasis (0343): 2; Bilirubinaemia (0339): 2; SGPT increased (0360): 3; Hepatocellular damage (0353): 4; SGOT increased (0359): 4; Hepatic enzymes increased (1,346): 5; Jaundice (0356): 8); **12-800 (n 94):** (Hypomagnesaemia (0798): 1; Xerophthalmia (0943): 1; Hyponatraemia (0392): 1; Cachexia (0368): 1; Hypophosphataemia (1,064): 1; Growth retarded (0379): 1; Insulin increased (2,339): 1; Hyperuricaemia (0385): 1; Ketosis (0393): 1; Diabetic ulcer (2,015): 1; Lipase increased (1,621): 1; Anion gap abnormal (1,589): 1; Phosphatase alkaline increased (0404): 1; Hypercalcaemia (0380): 1; Troponin t increased (2,090): 1; Hypocalcaemia (0387): 2; Dehydration (0370): 2; Acidosis (0363): 2; Fluid overload (1,018): 2; Creatine phosphokinase increased (0791): 2; Glucose tolerance abnormal (0376): 2; Thirst (0405): 2; Phosphatase alkaline decreased (2,056): 2; Weight decrease (0407): 3; Gout (0378): 3; Hyperkalaemia (0383): 3; Calcinosis (0369): 3; Hypoglycaemia (0389): 4; Hypokalaemia (0391): 5; Hyperglycaemia (0382): 9; Oedema pharynx (1,395): 33); **13-900 (n 9):** (Hypoparathyroidism (1,306): 1; Hypothyroidism (0417): 1; Diabetes insipidus (0411): 1; Myxoedema (0418): 1; Adrenal insufficiency (0410): 1; Thyroid disorder (0419): 1; Endocrine disorder NOS (1,252): 1; TSH increased (1,831): 2); **14-1,010 (n 606):** (Cardio-respiratory failure (1,899): 1; Vascular graft occlusion (2,109): 1; Aneurysm (0915): 1; Cardiac failure right (0498): 1; Hypertension portal (1,042): 1; Hypertension pulmonary (0211): 2; Cardiomegaly (1,320): 3; ECG abnormal (0502): 4; Hypotension postural (0213): 5; Blood pressure fluctuation (1,762): 7; Heart disorder (0504): 7; ECG abnormal specific (0503): 8; Cardiovascular disorders (2,031): 10; Pulse weak (1,401): 10; Cardiac failure (0496): 21; Cyanosis (0501): 46; Circulatory failure (0499): 77; Hypertension (0210): 142; Hypotension (0212): 259); **15-1,020 (n 52):** (Endocarditis (0427): 1; Thrombosis coronary (0488): 1; Aortic stenosis (0424): 1; Pericarditis (0430): 1; Aortic valve incompetence (1,761): 1; Cardiomyopathy (0425): 1; Mitral stenosis (1,554): 1; Cardiac enzymes increased (1,888): 1; Pericardial effusion (0910): 1; Fibrosis endocardial (1,274): 2; Heart valve disorders (1,228): 2; Mitral insufficiency (0899): 2; Coronary artery disorder (0426): 3; Fibrosis myocardial (1,188): 4; Myocardial ischaemia (0429): 6; Angina pectoris (0422): 8; Myocardial infarction (0428): 16); **16-1,030 (n 422):** (Arrhythmia nodal (0809): 1; AV block (0431): 2; T wave inversion (1,688): 2; Arrhythmia ventricular (0435): 2; QT prolonged (1,361): 2; Heart block (0441): 2; Adams Stokes syndrome (0432): 2; Bundle branch block (0436): 3; AV block complete (1,378): 4; Extrasystoles (0438): 5; Tachycardia ventricular (0230): 5; Tachycardia supraventricular (0229): 6; Fibrillation ventricular (0440): 7; Fibrillation atrial (0439): 14; Arrhythmia (0433): 19; Palpitation (0221): 33; Bradycardia (0208): 48; Cardiac arrest (0437): 85; Tachycardia (0224): 180); **17-1,040 (n 640):** (Stenosis vein (2,083): 1; Haemorrhage stroke (1,989): 1; Vein distended (0493): 1; Ocular haemorrhage (1,004): 1; Compartment syndrome (2,220): 1; Phlebitis deep (0456): 1; Haemorrhage anterior chamber eye

(0926): 1; Subarachnoid haemorrhage (0463): 1; Gangrene (0911): 1; Thrombophlebitis cerebral vein (0469): 1; Cerebral ischaemia (1,987): 1; Transient ischaemic attack (1,694): 1; Arteriosclerosis (0771): 2; Cerebral infarction (1,986): 2; Thrombophlebitis superficial (0479): 2; Renal artery occlusion (1,546): 2; Thrombophlebitis arm superficial (0468): 2; Vascular disorder (0491): 3; Vasculitis (0085): 3; Vein pain (0494): 3; Vasospasm (0226): 3; Thrombophlebitis deep (0470): 4; Cerebral haemorrhage (0444): 5; Thrombophlebitis arm (0467): 5; Cerebrovascular disorder (0445): 14; Vein disorder (0492): 14; Peripheral ischaemia (0454): 16; Thrombophlebitis (0466): 20; Phlebitis (0455): 63; Flushing (0207): 163; Vasodilatation (0225): 302); **18-1,100 (n 2,751):** (Larynx pain (1,648): 1; Airways obstruction (1,749): 1; Chest X-ray abnormal (0512): 1; Pleural fibrosis (0525): 1; Atelectasis (1,197): 1; Pneumothorax (0531): 1; Bronchial obstruction (1,820): 1; Pulmonary collapse (0979): 1; Sputum disorder (1,976): 1; Pulmonary infiltration (1,038): 1; Bronchospasm aggravated (1,066): 1; Respiratory distress syndrome (2,252): 1; Breath sounds decreased (1,716): 1; Sleep apnoea (1,515): 1; Pleural effusion (0524): 2; Bradypnoea (0510): 2; Aspiration (1030): 2; Bronchitis (0805): 3; Pneumonitis (1,141): 3; Haemoptysis (0516): 3; Upper respiratory tract infection (0543): 3; Asphyxia (0508): 4; Hypoventilation (0518): 4; Epistaxis (0515): 5; Chronic obstructive airways disease (1,493): 6; Pulmonary fibrosis (0532): 7; Sputum increased (0541): 7; Pulmonary disorders (2,032): 8; Pulmonary congestion (1,721): 9; Sinusitis (0540): 10; Asthma (1,367): 13; Pneumonia (0528): 14; Hypoxia (0519): 18; Hyperventilation (0517): 21; Respiratory disorder (0536): 22; Pulmonary oedema (0535): 27; Apnoea (0507): 31; Respiratory insufficiency (0537): 43; Respiratory depression (0144): 56; Stridor (0542): 59; Larynx oedema (0522): 73; Laryngitis (0521): 97; Throat tightness (1,489): 97; Pharyngitis (0523): 100; Bronchospasm (0511): 143; Laryngismus (0520): 151; Coughing (0513): 281; Rhinitis (0539): 554; Dyspnoea (0514): 859); **19-1,210 (n 18):** (Haemolysis (0560): 1; Haemosiderosis (1,427): 1; Serum iron increased (1,294): 1; Anaemia haemolytic direct Coomb's test negative (0549): 1; Anaemia haemolytic (0548): 2; Splenomegaly (0569): 2; Anaemia (0544): 4; Iron metabolism disorder (0777): 6); **20-1,220 (n 29):** (Granulocytopenia (0572): 1; Lymphopenia (0845): 1; Leucopenia (0908): 1; Eosinophilia (0571): 2; Lymphoedema (0581): 2; Lymphadenopathy (0577): 4; Lymphangitis (0580): 8; Leukocytosis (0576): 10); **21-1,230 (n 50):** (Purpura thrombocytopenic (1,348): 1; Thrombus intracardiac (2,113): 1; Thrombosis arterio-venous fistula (1,776): 1; Haemorrhage retroperitoneal (1,214): 1; Thrombosis venous arm (1,370): 1; Prothrombin decreased (0590): 2; Coagulation factor decreased (1,122): 2; Embolism arterial (0447): 2; Coagulation disorder (0586): 3; Disseminated intravascular coagulation (1,175): 3; Thrombocytopenia (0594): 4; Haematoma (1,353): 4; Thrombosis (0481): 7; Embolism pulmonary (0451): 7; Purpura (0459): 11); **22-1,300 (n 530):** (Pyelonephritis (0614): 1; Urine abnormal (0629): 1; Oliguria (0612): 1; Polyuria (0613): 1; Micturition urgency (1,497): 1; Creatinine clearance decreased (0598): 1; Nephrosclerosis (1,177): 1; Renal cyst (1,138): 1; Nephritis (0607): 1; Renal tubular disorder (0623): 1; Urinary tract stenosis (2,317): 1; Urinary retention (0157): 1; Albuminuria (0595): 2; Urinary crystals (1,461): 2; Renal interstitial fibrosis (1,328): 2; Strangury (0625): 2; Micturition frequency (0606): 2; Renal calculus (0617): 3; Renal tubular necrosis (0624): 3; Nephropathy toxic (0609): 3; Dysuria (0601): 3; Haematuria (0604): 5; Anuria (0596): 6; Renal pain (0621): 8; Urinary tract infection (0628): 8; Renal failure chronic (2,329): 15; Renal function abnormal (0619): 15; Azotaemia (2,328): 17; Urinary

incontinence (0156): 23; Renal failure acute (0618): 25; Face oedema (0602): 374); **23-1,410 (n 2):** (Prostatic disorder (0632): 1; Testicular pain (1,500): 1); **24-1,420 (n 5):** (Menstrual disorder (0657): 1; Breast pain (1,839): 1; Pre-eclampsia (1,702): 1; Lactation puerperal decreased (0946): 1; Pregnancy unintended (0663): 1); **25-1,500 (n 11):** (Heart malformation (0691): 1; Ventricular septal defect (0707): 1; Vascular malformation peripheral (0764): 1; Naevus (0948): 2; Abortion (0634): 2; Drug exposure in pregnancy (2,221): 4); **26-1,600 (n 1):** (Birth premature (0637): 1); **27-1,700 (n 84):** (Histiocytoma (2,046): 1; Bladder carcinoma (0766): 1; Neoplasm NOS (1,259): 1; Breast neoplasm benign female (1,114): 1; Uterine fibroid (0857): 1; Brain neoplasm NOS (1,862): 1; Skin hypertrophy (0038): 78); **28-1,810 (n 3,061):** (Abdomen enlarged (0711): 1; Wound drainage increased (1,715): 1; Infection TBC (0923): 1; Ascites (0715): 1; Hernia NOS (1,832): 1; Serum sickness (0733): 1; Chest pain precordial (0719): 1; Granulomatous lesion (0876): 1; Oedema dependent (0399): 1; ESR increased (0723): 1; Posture abnormal (2,012): 1; Medicine ineffective (1,948): 2; Carpal tunnel syndrome (1,397): 2; Withdrawal syndrome (0200): 2; Anaesthetic complication (2,160): 2; Multiple organ failure (1,819): 3; Therapeutic response increased (0874): 3; Hyperpyrexia (0894): 3; Night sweats (1898): 3; Hypothermia (0727): 4; Leg pain (1,439): 4; Crying abnormal (1,162): 4; Tenderness NOS (1,911): 4; Sudden death (1,134): 4; Chest pain substernal (0720): 8; Drug hypersensitivity syndrome (2,309): 8; C-reactive protein increased (2,351): 8; Influenza-like symptoms (1,222): 8; Allergy (1,058): 10; Condition aggravated (0965): 13; Back pain (0717): 27; Oedema mouth (1,485): 28; Choking (1,460): 29; Oedema generalised (0400): 32; Oedema periorbital (1,009): 46; Death (0722): 53; Pallor (0220): 60; Asthenia (0716): 64; Fever (0725): 65; Fatigue (0724): 65; Anaphylactic reaction (2,237): 74; Oedema (0398): 85; Anaphylactic shock (0713): 106; Allergic reaction (0712): 114; Rigors (0731): 122; Anaphylactoid reaction (0714): 126; Syncope (0223): 137; Temperature changed sensation (1,705): 141; Oedema peripheral (0401): 170; Scar (1,522): 201; Malaise (0728): 311; Chest pain (0718): 320; Pain (0730): 579); **29-1,820 (n 551):** (Injection site pruritus (1,880): 1; Injection site anaesthesia (1,917): 1; Neovascularisation (1,474): 2; Medical device complication (2,139): 2; Injection site necrosis (0056): 2; Infusion site rash (2,136): 2; Injection site bleeding (1,752): 2; Application site reaction (0047): 3; Injection site infection (1,910): 4; Injection site urticaria (1,968): 4; Infusion site reaction (2,137): 5; Injection site bruising (1,753): 6; Cellulitis (1,372): 8; Injection site mass (0055): 14; Injection site inflammation (0054): 28; Injection site rash (1,881): 31; Injection site pain (0057): 191; Injection site reaction (0058): 245); **30-1,830 (n 122):** (Herpes simplex (0867): 1; Infection susceptibility increased (1,226): 1; Infection fungal (0739): 1; Healing impaired (0896): 1; Abscess (0887): 2; Infection bacterial (0738): 3; Infection staphylococcal (1,867): 5; Infection (0736): 8; Sepsis (0744): 12; Skin tightness (2,098): 88. **6-Gadoteric acid (n 8): 1-100 (n 1):** (Urticaria (0044): 1); **4-410 (n 2):** (Dysaesthesia (1,491): 1; Paraesthesia (0137): 1); **10-600 (n 3):** (Vomiting (0228): 1; Nausea (0308): 2); **18-1,100 (n 2):** (Dyspnoea (0514): 1; Throat tightness (1,489): 1). **7-Gadoteridol (n 3,428): 1-100 (n 504):** (Heat rash (1,469): 1; Hyperkeratosis (0966): 1; Erythema induratum (0912): 1; Papilloma (1,486): 1; Skin reaction localised (1,650): 1; Pigmentation abnormal (0973): 1; Eyelid skin disorder (2,253): 1; Scleroderma (0971): 1; Rash pustular (0032): 2; Skin depigmentation (0035): 2; Skin atrophy (0034): 2; Dermatitis (0007): 2; Bullous eruption (0871): 2; Urticaria acute (0045): 2; Skin cold clammy (0932): 3; Skin necrosis (0060): 3; Skin nodule (0061): 3; Skin ulceration (0041): 5; Angioedema (0003): 7; Skin

exfoliation (1,199): 10; Dermatitis exfoliative (0008): 11; Skin dry (1,123): 13; Skin disorder (0037): 14; Sweating increased (0043): 15; Rash maculo-papular (0030): 18; Induration (1,891): 27; Rash (0027): 33; Skin discolouration (0036): 34; Rash erythematous (0028): 42; Urticaria (0044): 80; Fibrosis skin (2,314): 81; Pruritus (0024): 85); **2-200 (n 166):** (Arthropathy (0065): 1; Fracture pathological (0069): 1; Osteomyelitis (1,184): 1; Ligament disorder (2,086): 1; Muscle atrophy (0072): 2; Myositis (0748): 2; Tendon disorder (1,074): 3; Myopathy (0074): 3; Arthritis (0064): 7; Skeletal pain (1,347): 11; Arthralgia (0063): 14; Myalgia (0073): 21; Muscle weakness (1,128): 24; Arthrosis (0066): 27; Deformity (2,209): 48); **4-410 (n 384):** (Hyperaesthesia (0113): 1; Hyperkinesia (0114): 1; Brain stem disorder (0810): 1; Muscle contractions involuntary (0155): 1; Coordination abnormal (0097): 1; Neuralgia (0124): 1; Hemiplegia (0112): 1; Quadriplegia (0143): 1; Cramps legs (0939): 1; Spinal stenosis (1,975): 1; Torticollis (0077): 1; Tongue paralysis (0153): 1; Ataxia (0088): 2; Vertigo (0158): 2; Hypotonia (0119): 2; Sensory disturbance (0148): 2; Aphasia (0087): 3; Oculogyric crisis (0132): 3; Headache (0109): 4; Neuropathy peripheral (1,313): 5; Speech disorder (0150): 5; Tremor (0154): 6; Convulsions (0093): 7; Convulsions grand mal (0095): 9; Stupor (0151): 10; Dysphonia (0103): 10; Dyskinesia (0102): 16; Hypoaesthesia (0117): 17; Dysaesthesia (1,491): 17; Coma (0091): 18; Dizziness (0101): 20; Gait abnormal (0108): 22; Hypertonia (0116): 23; Paraesthesia (0137): 38; Hypokinesia (0118): 131); **6-431 (n 28):** (Fixed pupils (1,605): 1; Eye pain (0244): 1; Eye abnormality (0243): 2; Mydriasis (0219): 2; Vision abnormal (0257): 3; Lacrimation abnormal (1,049): 5; Conjunctivitis (0238): 14); **7-432 (n 2):** (Ear disorder NOS (1,255): 1; Tinnitus (0264): 1); **8-433 (n 2):** (Taste perversion (0267): 2); **9-500 (n 585):** (Aggressive reaction (0162): 1; Thinking abnormal (0199): 1; Snoring (1,511): 1; Personality disorder (0192): 1; Catatonic reaction (0169): 1; Anorexia (0165): 2; Nervousness (0188): 3; Confusion (0092): 3; Insomnia (0183): 4; Mental disorder (1,944): 4; Depression (0172): 6; Agitation (0163): 7; Depersonalization (0171): 9; Somnolence (0197): 10; Apathy (0167): 84; Emotional lability (0177): 222; Anxiety (0166): 226); **10-600 (n 217):** (Dyspepsia (0279): 1; Stomatitis (0327): 1; Gastritis (0291): 1; Constipation (0204): 1; GI haemorrhage (0294): 1; Cheilitis (0270): 1; Haemorrhage rectum (1,014): 1; Glossitis (0295): 2; Mucositis NOS (1,351): 2; Saliva increased (0222): 2; Mouth dry (0218): 5; Diarrhoea (0205): 5; Abdominal pain (0268): 6; Dysphagia (0280): 9; Tongue oedema (0331): 9; Vomiting (0228): 63; Nausea (0308): 107); **11-700 (n 4):** (Hepatic necrosis (0349): 1; Jaundice (0356): 1; Hepatic enzymes increased (1,346): 2); **12-800 (n 12):** (Cachexia (0368): 1; Acidosis (0363): 1; Weight decrease (0407): 1; Hypokalaemia (0391): 1; Hypoglycaemia (0389): 2; Calcinoses (0369): 2; Oedema pharynx (1,395): 4); **13-900 (n 1):** (Adrenal insufficiency (0410): 1); **14-1,010 (n 115):** (Cardiomegaly (1,320): 1; Heart murmur (1,471): 1; Heart disorder (0504): 1; ECG abnormal (0502): 2; Hypertension pulmonary (0211): 2; Blood pressure fluctuation (1,762): 3; Cardiac failure (0496): 4; Pulse weak (1,401): 5; Cyanosis (0501): 7; Hypertension (0210): 15; Circulatory failure (0499): 21; Hypotension (0212): 53); **15-1,020 (n 9):** (Coronary artery disorder (0426): 1; Myocardial infarction (0428): 1; Angina pectoris (0422): 1; Fibrosis endocardial (1,274): 2; Fibrosis myocardial (1,188): 4); **16-1,030 (n 48):** (Fibrillation cardiac (0442): 1; AV block (0431): 1; Torsade de pointes (1,431): 1; Palpitation (0221): 1; Arrhythmia nodal (0809): 1; QT prolonged (1,361): 1; Fibrillation atrial (0439): 1; Tachycardia ventricular (0230): 1; Fibrillation ventricular (0440): 2; Bradycardia (0208): 10; Tachycardia (0224): 12; Cardiac arrest (0437): 16); **17-1,040 (n 24):** (Cerebral haemorrhage (0444): 1; Vein disorder (0492): 1; Peripheral ischaemia (0454): 1;

Cerebral ischaemia (1,987): 1; Vasodilatation (0225): 1; Flushing (0207): 19; **18-1,100 (n 243):** (Hypopnoea (1,712): 1; Sinusitis (0540): 1; Pleural fibrosis (0525): 1; Bronchial obstruction (1,820): 1; Apnoea (0507): 1; Epistaxis (0515): 1; Pneumonitis (1,141): 1; Asthma (1,367): 1; Pulmonary congestion (1,721): 1; Hyperventilation (0517): 1; Pulmonary infiltration (1,038): 1; Chronic obstructive airways disease (1,493): 1; Respiratory disorder (0536): 1; Pneumonia (0528): 2; Pulmonary fibrosis (0532): 2; Yawning (0201): 2; Pulmonary oedema (0535): 2; Laryngismus (0520): 2; Pharyngitis (0523): 2; Respiratory distress syndrome (2,252): 2; Pulmonary disorders (2,032): 3; Respiratory depression (0144): 6; Bronchospasm (0511): 7; Stridor (0542): 7; Laryngitis (0521): 8; Respiratory insufficiency (0537): 10; Larynx oedema (0522): 11; Throat tightness (1,489): 17; Coughing (0513): 21; Rhinitis (0539): 39; Dyspnoea (0514): 87); **19-1,210 (n 1):** (Anaemia (0544): 1); **20-1,220 (n 2):** (Leukocytosis (0576): 1; Lymphoedema (0581): 1); **21-1,230 (n 8):** (Prothrombin decreased (0590): 1; Purpura thrombocytopenic (1,348): 1; Thrombus intracardiac (2,113): 1; Thrombosis arterio-venous fistula (1,776): 1; Purpura (0459): 2; Disseminated intravascular coagulation (1,175): 2); **22-1,300 (n 36):** (Azotaemia (2,328): 1; Urinary tract stenosis (2,317): 1; Renal function abnormal (0619): 1; Micturition disorder (0605): 1; Urinary incontinence (0156): 1; Renal failure acute (0618): 3; Face oedema (0602): 28); **23-1,410 (n 1):** (Prostatic disorder (0632): 1); **24-1,420 (n 1):** (Breast pain (1,839): 1); **25-1,500 (n 2):** (Atrial septal defect (0677): 1; Drug exposure in pregnancy (2,221): 1); **26-1,600 (n 1):** (Hypoglycaemia neonatal (0960): 1); **27-1,700 (n 46):** (Breast neoplasm benign female (1,114): 1; Histiocytoma (2,046): 1; Bladder carcinoma (0766): 1; Skin hypertrophy (0038): 43); **28-1,810 (n 938):** (Multiple organ failure (1,819): 1; Granulomatous lesion (0876): 1; Withdrawal syndrome (0200): 1; Fever (0725): 1; Night sweats (1,898): 1; Posture abnormal (2,012): 1; Choking (1,460): 2; Drug hypersensitivity syndrome (2,309): 2; Rigors (0731): 3; Back pain (0717): 3; Death (0722): 3; Oedema mouth (1,485): 5; Fatigue (0724): 7; Pallor (0220): 10; Oedema periorbital (1,009): 11; Oedema generalised (0400): 11; Anaphylactic shock (0713): 14; Syncope (0223): 15; Oedema (0398): 16; Temperature changed sensation (1,705): 17; Asthenia (0716): 21; Chest pain (0718): 28; Anaphylactic reaction (2,237): 33; Anaphylactoid reaction (0714): 35; Oedema peripheral (0401): 41; Allergic reaction (0712): 56; Scar (1,522): 133; Malaise (0728): 159; Pain (0730): 307); **29-1,820 (n 3):** (Injection site inflammation (0054): 1; Cellulitis (1,372): 1; Injection site rash (1,881): 1); **30-1,830 (n 45):** (Infection staphylococcal (1,867): 1; Infection susceptibility increased (1,226): 1; Abscess (0887): 1; Skin tightness (2,098): 42). **8-Gadoversetamide (2,836):** **1-100 (n 371):** (Papilloma (1,486): 1; Pigmentation abnormal (0973): 1; Acne (0001): 1; Acanthosis (1,052): 1; Onychomycosis (1,638): 1; Alopecia (0002): 1; Epidermal necrolysis (0013): 1; Dermatitis contact (0049): 1; Rash pustular (0032): 1; Livedo reticularis (1,410): 1; Skin depigmentation (0035): 2; Skin atrophy (0034): 2; Bullous eruption (0871): 3; Hyperkeratosis (0966): 3; Skin necrosis (0060): 3; Sweating increased (0043): 3; Urticaria (0044): 4; Skin nodule (0061): 4; Scleroderma (0971): 4; Skin ulceration (0041): 6; Skin exfoliation (1,199): 11; Dermatitis exfoliative (0008): 13; Rash (0027): 14; Rash maculo-papular (0030): 18; Skin dry (1,123): 19; Rash erythematous (0028): 20; Skin disorder (0037): 24; Induration (1,891): 30; Pruritus (0024): 32; Skin discolouration (0036): 38; Fibrosis skin (2,314): 108); **2-200 (n 216):** (Ligament disorder (2,086): 1; Fracture pathological (0069): 1; Tendinitis (1,001): 1; Arthritis infective (2,024): 1; Chondrocalcinosis (2,228): 1; Arthropathy (0065): 1; Avascular necrosis bone (2,222): 1; Osteoporosis (0076): 2; Muscle atrophy (0072): 2; Musculoskeletal pain (1,889): 2;

Tendon disorder (1,074): 3; Osteomyelitis (1,184): 3; Myopathy (0074): 3; Fracture (2,190): 3; Arthritis (0064): 9; Skeletal pain (1,347): 15; Arthralgia (0063): 17; Myalgia (0073): 24; Muscle weakness (1,128): 28; Arthrosis (0066): 33; Deformity (2,209): 65); **3-300 (n 2):** (Graft versus host disease (1,770): 1; LE syndrome (0081): 1); **4-410 (n 329):** (Hyperkinesia (0114): 1; Aphasia (0087): 1; Neuralgia (0124): 1; Coordination abnormal (0097): 1; Oedema cerebral (0891): 1; Dysphonia (0103): 1; Paresis (0141): 1; Trigeminal disorders (2,169): 1; Sensory disturbance (0148): 1; Hemiparesis (0111): 1; Speech disorder (0150): 1; Tongue paralysis (0153): 1; Spinal stenosis (1,975): 1; Oculogyric crisis (0132): 2; Hyperaesthesia (0113): 2; Cerebral disorder (1,960): 2; Encephalopathy (0105): 2; Stupor (0151): 2; Muscle contractions involuntary (0155): 2; Paralysis (0138): 2; Ataxia (0088): 3; Convulsions (0093): 3; Tremor (0154): 3; Vertigo (0158): 4; Convulsions grand mal (0095): 4; Coma (0091): 5; Dizziness (0101): 7; Neuropathy peripheral (1,313): 7; Headache (0109): 8; Dysaesthesia (1,491): 13; Dyskinesia (0102): 13; Hypoaesthesia (0117): 15; Hypertonia (0116): 21; Gait abnormal (0108): 23; Paraesthesia (0137): 29; Hypokinesia (0118): 144); **6-431 (n 8):** (Keratitis (0246): 1; Lacrimation abnormal (1,049): 1; Eye abnormality (0243): 1; Conjunctivitis (0238): 2; Vision abnormal (0257): 3); **8-433 (n 2):** (Taste perversion (0267): 2); **9-500 (n 620):** (Suicide ideation (2,363): 1; Delirium (0099): 1; Agitation (0163): 1; Aggressive reaction (0162): 1; Personality disorder (0192): 1; Drug abuse (0175): 1; Amnesia (0164): 1; Nervousness (0188): 1; Confusion (0092): 2; Anorexia (0165): 2; Depersonalization (0171): 3; Mental disorder (1944): 4; Somnolence (0197): 4; Insomnia (0183): 6; Depression (0172): 15; Apathy (0167): 87; Emotional lability (0177): 242; Anxiety (0166): 247); **10-600 (n 66):** (GI haemorrhage (0294): 1; Haemorrhage intraabdominal (1,419): 1; Bowel motility disorder (1,842): 1; Haemorrhage rectum (1014): 1; Diarrhoea, Clostridium difficile (1,201): 1; Saliva increased (0222): 1; Diverticula (1,908): 1; Peritonitis (0320): 1; Intestinal ischaemia (1,308): 1; Gastro-intestinal disorder NOS (1,262): 1; Melaena (0306): 1; Duodenitis (1,217): 1; Oesophageal ulceration (0311): 1; Diseases of oesophagus (1,059): 1; Oesophagitis (0309): 1; Haemorrhoids (0298): 2; Pancreatitis (0314): 2; Gastric dilatation (0286): 2; Gastroesophageal reflux (1,149): 2; Diarrhoea (0205): 3; Dysphagia (0280): 3; Mouth dry (0218): 3; Constipation (0204): 3; Vomiting (0228): 9; Abdominal pain (0268): 9; Nausea (0308): 13); **11-700 (n 5):** (Hepatic necrosis (0349): 1; Hepatitis (0350): 1; Jaundice (0356): 1; Cholelithiasis (0343): 2); **12-800 (n 21):** (Gout (0378): 1; Acidosis (0363): 1; Hypercholesterolaemia (0381): 1; Cachexia (0368): 1; Hyperkalaemia (0383): 1; Diabetes mellitus (0371): 1; Hypocalcaemia (0387): 1; Fluid overload (1,018): 1; Acidosis lactic (0364): 1; Diabetic ulcer (2015): 1; Hypophosphataemia (1,064): 1; Hypokalaemia (0391): 1; Calcinoses (0369): 2; Weight decrease (0407): 3; Hypoglycaemia (0389): 4); **13-900 (n 5):** (Hypoparathyroidism (1,306): 1; Adrenal insufficiency (0410): 1; Hypothyroidism (0417): 1; Hyperparathyroidism (0921): 1; Myxoedema (0418): 1); **14-1,010 (n 47):** (Heart disorder (0504): 1; Vascular graft occlusion (2,109): 1; Hypertension portal (1,042): 1; Pulse weak (1,401): 1; ECG abnormal specific (0503): 1; Circulatory failure (0499): 2; Hypertension pulmonary (0211): 3; Hypotension (0212): 5; Cardiomegaly (1,320): 6; Hypertension (0210): 13; Cardiac failure (0496): 13); **15-1,020 (n 23):** (Cardiomyopathy (0425): 1; Pericarditis (0430): 1; Mitral stenosis (1,554): 1; Aortic valve incompetence (1,761): 1; Myocardial infarction (0428): 1; Fibrosis endocardial (1,274): 2; Mitral insufficiency (0899): 2; Aortic stenosis (0424): 2; Heart valve disorders (1,228): 2; Angina pectoris (0422): 2; Coronary artery disorder (0426): 4; Fibrosis myocardial (1,188): 4); **16-1,030**

(n 19): (Arrhythmia (0433): 1; Tachycardia ventricular (0230): 1; Arrhythmia nodal (0809): 1; Tachycardia supraventricular (0229): 1; Palpitation (0221): 1; AV block complete (1,378): 1; QT prolonged (1,361): 1; Fibrillation atrial (0439): 2; Tachycardia (0224): 2; AV block (0431): 2; Bradycardia (0208): 2; Cardiac arrest (0437): 4); **17-1,040 (n 34):** (Haemorrhage stroke (1,989): 1; Thrombophlebitis (0466): 1; Subclavian steal syndrome (2,011): 1; Stenosis vein (2,083): 2; Haemorrhage intracranial (1,068): 2; Cerebral haemorrhage (0444): 2; Vasodilatation (0225): 2; Transient ischaemic attack (1,694): 2; Peripheral ischaemia (0454): 4; Flushing (0207): 4; Thrombophlebitis deep (0470): 4; Vein disorder (0492): 4; Cerebrovascular disorder (0445): 5); **18-1,100 (n 73):** (Atelectasis (1,197): 1; Upper respiratory tract infection (0543): 1; Pneumonitis (1,141): 1; Pulmonary congestion (1,721): 1; Pharyngitis (0523): 1; Chronic obstructive airways disease (1,493): 1; Sinusitis (0540): 1; Pulmonary infiltration (1,038): 1; Pleural fibrosis (0525): 1; Respiratory distress syndrome (2,252): 1; Pulmonary fibrosis (0532): 2; Rhinitis (0539): 2; Coughing (0513): 2; Respiratory depression (0144): 2; Bronchitis (0805): 2; Larynx oedema (0522): 2; Throat tightness (1,489): 2; Stridor (0542): 2; Sleep apnoea (1,515): 3; Pulmonary disorders (2,032): 4; Pulmonary oedema (0535): 6; Pleural effusion (0524): 7; Pneumonia (0528): 7; Respiratory insufficiency (0537): 9; Dyspnoea (0514): 11); **19-1,210 (n 4):** (Splenomegaly (0569): 1; Anaemia (0544): 3); **20-1,220 (n 3):** (Lymphoedema (0581): 1; Leukocytosis (0576): 2); **21-1,230 (n 16):** (Prothrombin decreased (0590): 1; Thrombus intracardiac (2,113): 1; Thrombosis (0481): 1; Haemorrhage NOS (0452): 1; Thrombosis arterial leg (0484): 1; Embolism arterial (0447): 1; Thrombosis arterio-venous fistula (1,776): 1; Purpura (0459): 2; Embolism pulmonary (0451): 2; Embolism aortic (2,041): 2; Thrombocytopenia (0594): 3); **22-1,300 (n 18):** (Azotaemia (2,328): 1; Urinary tract stenosis (2,317): 1; Renal cyst (1,138): 2; Urinary incontinence (0156): 2; Renal function abnormal (0619): 3; Urinary tract infection (0628): 4; Renal failure chronic (2,329): 5); **23-1,410 (n 2):** (Hernia inguinal (1,482): 1; Prostatic disorder (0632): 1); **27-1,700 (n 55):** (Cervical smear test positive (0826): 1; Histiocytoma (2,046): 1; Bladder carcinoma (0766): 1; Breast neoplasm benign female (1,114): 1; Basal cell carcinoma (1,240): 1; Uterine fibroid (0857): 1; Skin neoplasm malignant (1,239): 1; Skin hypertrophy (0038): 48); **28-1,810 (n 814):** (Night sweats (1,898): 1; Nasal polyp (0985): 1; Anaphylactoid reaction (0714): 1; Influenza-like symptoms (1,222): 1; Oedema mouth (1,485): 1; Multiple organ failure (1,819): 1; Pallor (0220): 1; Leg pain (1,439): 1; Posture abnormal (2,012): 1; Therapeutic response increased (0874): 1; Tenderness NOS (1,911): 1; Allergic reaction (0712): 2; Oedema periorbital (1009): 2; Withdrawal syndrome (0200): 2; Temperature changed sensation (1,705): 2; Rigors (0731): 2; Hernia NOS (1,832): 2; Death (0722): 3; Fever (0725): 4; Syncope (0223): 4; Back pain (0717): 5; Chest pain (0718): 5; Fatigue (0724): 9; Oedema generalised (0400): 10; Oedema (0398): 14; Asthenia (0716): 19; Oedema peripheral (0401): 51; Scar (1,522): 148; Malaise (0728): 181; Pain (0730): 338); **29-1,820 (n 13):** (Injection site rash (1,881): 1; Medical device complication (2,139): 1; Injection site reaction (0058): 5; Cellulitis (1,372): 6); **30-1,830 (n 70):** (Infection fungal (0739): 1; Infection bacterial (0738): 1; Infection susceptibility increased (1,226): 1; Herpes zoster (0862): 1; Abscess (0887): 2; Infection (0736): 3; Infection staphylococcal (1,867): 4; Sepsis (0744): 11; Skin tightness (2,098): 46). **9-Gadoteric acid (n 98):** **1-100 (n 20):** (Rash maculo-papular (0030): 1; Rash (0027): 1; Rash erythematous (0028): 1; Skin discolouration (0036): 1; Sweating increased (0043): 3; Urticaria (0044): 6; Pruritus (0024): 7); **4-410 (n 8):** (Dysaesthesia (1,491): 1; Paraesthesia (0137): 1; Hypoaesthesia (0117): 1; Headache

(0109): 2; Dizziness (0101): 3); **6-431 (n 1):** (Lacrimation abnormal (1,049): 1); **8-433 (n 1):** (Parosmia (0265): 1); **9-500 (n 3):** (Anxiety (0166): 1; Agitation (0163): 1; Confusion (0092): 1); **10-600 (n 12):** (Dyspepsia (0279): 1; Stomatitis ulcerative (0328): 1; Diarrhoea (0205): 2; Vomiting (0228): 2; Nausea (0308): 6); **11-700 (n 2):** (Hepatic function abnormal (0348): 1; Hepatitis cholestatic (0351): 1); **14-1,010 (n 2):** (Cardiovascular disorders (2,031): 2); **15-1,020 (n 2):** (Angina pectoris (0422): 1; Myocardial ischaemia (0429): 1); **16-1,030 (n 4):** (Arrhythmia (0433): 1; Tachycardia (0224): 3); **1,040 (n 3):** (Peripheral ischaemia (0454): 1; Flushing (0207): 1; Vasospasm (0226): 1); **18-1,100 (n 15):** (Pulmonary oedema (0535): 1; Respiratory disorder (0536): 1; Hyperventilation (0517): 1; Rhinitis (0539): 1; Throat tightness (1,489): 1; Dyspnoea (0514): 10); **22-1,300 (n 1):** (Face oedema (0602): 1); **28-1,810 (n 20):** (Fever (0725): 1; Choking (1,460): 1; Anaphylactic reaction (2,237): 1; Anaphylactoid reaction (0714): 1; Malaise (0728): 1; Syncope (0223): 1; Oedema peripheral (0401): 1; Back pain (0717): 1; Pallor (0220): 1; Allergic reaction (0712): 2; Chest pain (0718): 2; Temperature changed sensation (1,705): 2; Rigors (0731): 5); **29-1,820 (n 4):** (Injection site pain (0057): 1; Injection site rash (1,881): 1; Injection site anaesthesia (1,917): 1; Injection site reaction (0058): 1). **10-Mangafodipir (n 9):** **4-410 (n 1):** (Headache (0109): 1); **14-1,010 (n 1):** (Hypotension (0212): 1); **17-1,040 (n 2):** (Flushing (0207): 2); **18-1,100 (n 2):** (Chest X-ray abnormal (0512): 1; Pneumonia (0528): 1); **28-1,810 (n 3):** (Condition aggravated (0965): 1; Anaphylactoid reaction (0714): 1; Fever (0725): 1).

Appendix Nr. 2. The 700 SOCD-ADRs effectively appearing in the RMN 10 paramagnetic product list of Appendix Nr. 1.

The basic Matlab file containing 2364 rows x 10 columns (the 10 columns corresponding to the 10 products) had been then reduced to the equivalent 700x 10 matrix file (without the null rows). In this table are given the index numbers of the 700 ADRs effectively present.

This table is to be read across and down. The format of 70 rows and 10 columns was chosen for printing convenience only; **the 10 columns of this table are not related in any way with the 10 contrast media treated** (we could print the same data as a 140x5 matrix, for instance).

1	2	3	7	8	10	12	13	14	16
20	22	24	27	28	30	31	32	33	34
35	36	37	38	39	41	42	43	44	45
47	49	54	55	56	57	58	60	61	63
64	65	66	67	68	69	72	73	74	76
77	81	85	87	88	90	91	92	93	94
95	97	98	99	100	101	102	103	104	105
106	107	108	109	111	112	113	114	116	117
118	119	120	121	123	124	125	130	131	132

133	136	137	138	141	142	143	144	148	150
151	152	153	154	155	156	157	158	159	162
163	164	165	166	167	169	171	172	175	177
179	180	183	186	187	188	189	191	192	193
195	197	199	200	201	204	205	207	208	210
211	212	213	215	216	218	219	220	221	222
223	224	225	226	228	229	230	231	232	237
238	241	243	244	246	247	250	255	257	258
260	261	264	265	266	267	268	270	279	280
281	283	285	286	287	289	291	293	294	295
297	298	300	301	302	306	308	309	311	314
320	327	328	330	331	336	339	343	345	347
348	349	350	351	353	356	359	360	363	364
368	369	370	371	374	376	377	378	379	380
381	382	383	385	387	389	391	392	393	394
398	399	400	401	404	405	407	410	411	417
418	419	422	424	425	426	427	428	429	430
431	432	433	435	436	437	438	439	440	441
442	444	445	447	448	451	452	454	455	456
459	463	466	467	468	469	470	479	481	482
484	486	488	491	492	493	494	496	497	498
499	501	502	503	504	507	508	510	511	512
513	514	515	516	517	518	519	520	521	522
523	524	525	528	531	532	535	536	537	539
540	541	542	543	544	548	549	557	560	569
571	572	576	577	580	581	584	586	590	594

595	596	598	601	602	603	604	605	606	607
608	609	610	612	613	614	617	618	619	621
622	623	624	625	628	629	632	634	637	657
663	677	689	691	692	707	711	712	713	714
715	716	717	718	719	720	722	723	724	725
727	728	730	731	733	736	738	739	740	741
744	748	761	764	766	771	777	791	798	805
809	810	826	827	828	830	845	850	857	862
864	867	871	874	876	878	887	891	894	896
899	908	910	911	912	915	921	923	926	928
929	932	933	939	942	943	946	948	955	960
961	965	966	971	973	974	979	985	990	1001
1004	1009	1014	1018	1019	1030	1036	1038	1042	1049
1052	1058	1059	1063	1064	1066	1068	1074	1077	1081
1082	1083	1086	1096	1101	1104	1114	1122	1123	1126
1127	1128	1134	1138	1141	1149	1162	1168	1172	1175
1177	1181	1184	1188	1197	1199	1201	1210	1214	1217
1222	1226	1228	1239	1240	1251	1252	1255	1259	1262
1274	1280	1281	1291	1294	1306	1308	1313	1320	1328
1334	1346	1347	1348	1351	1353	1361	1367	1368	1370
1372	1376	1378	1387	1395	1397	1398	1401	1410	1416
1419	1427	1429	1431	1432	1439	1451	1460	1461	1469
1471	1474	1482	1485	1486	1489	1491	1493	1497	1500
1505	1511	1515	1522	1531	1546	1547	1549	1554	1558
1574	1589	1605	1621	1638	1648	1650	1688	1694	1702
1705	1707	1712	1715	1716	1721	1723	1746	1749	1752

1753	1761	1762	1770	1776	1782	1806	1819	1820	1831
1832	1835	1839	1842	1843	1844	1862	1867	1877	1880
1881	1882	1888	1889	1891	1898	1899	1908	1910	1911
1917	1922	1944	1946	1948	1950	1960	1968	1970	1975
1976	1977	1978	1986	1987	1989	2008	2011	2012	2015
2024	2031	2032	2041	2046	2056	2082	2083	2086	2090
2098	2109	2113	2133	2136	2137	2139	2160	2162	2169
2172	2190	2209	2220	2221	2222	2228	2237	2252	2253
2309	2314	2317	2328	2329	2339	2351	2356	2363	2364



CAVEAT DOCUMENT

Accompanying statement to data released from the WHO Collaborating Centre

The WHO Collaborating Centre for International Drug Monitoring (Geneva, Switzerland) releases summaries of adverse events reported by health care providers or pharmacists of products from National Centres in countries participating in the Collaborative Programme. Only limited details about each reported adverse event are released, i.e. the centre code, the product name, the date of initiation and conclusion which partly make information of interest to be less detailed.

The summaries released provide the "generalized view" of a specific product and particular adverse events reported. The number of individual adverse events occurring may vary in the course of time in different countries, both in time and from place to place.

The reports submitted by the collaborating centres may represent complete or incomplete information which includes other information such as age, sex, race, or more detailed information on the circumstances of the event, or other information which may be available from the pharmacovigilance system of the reporting centre.

The reports, which are submitted to National Centres, come from local hospitals and voluntary medical, pharmaceutical, other National Centres, associations and other agencies of health professionals. Some National Centres exclude specific types of pharmaceutical names due to confidentiality submitted to the Collaborating Centre or other National Centres.

The details of therapeutic protocols (pharmaceutical products) may be associated by a number of different products, either in tablets, solution of injections and other forms such as capsules, from small to large production in many countries. Therefore, no information is provided on the number of patients exposed to each product.

Thus the reader is implored especially to take into account the perspective:

A number of National Centres which contribute information to the Collaborating Centre make no reference of the individual pharmaceutical products used in suspected reactions. Other National Centres do not mention such information in their reports to the WHO database.

Therefore, readers must always verify the source of the information and from the Collaborating Centre may receive different information than individual reports from National Centres.

For the above reasons, interpretations of adverse reaction data, and particularly those based on comparisons between pharmaceutical products, may be misleading. The information submitted in the accompanying reports is not homogeneous with respect to the source of the information or the likelihood that the pharmaceutical product caused the suspected adverse reaction. Some describe such information as "raw data". Any use of this information should take into account all of the above.

Some National Centres submit the published release of their information to the Collaborating Centre, who needs to use it as a source of information for publications.

Any publication, whether in part or the whole, information can be published with citation and

(i) the source of the information;

(ii) the information is homogeneous with respect to origin and how the pharmaceutical products used in suspected reactions were used;

(iii) the information does not represent the opinion of the World Health Organization.

Omission of these 3 statements may exclude the responsible person or organization from liability in damages from the system.

References

- [1] Grobner T. Gadolinium – a specific trigger for the development of nephrogenic fibrosing dermopathy and nephrogenic systemic fibrosis?. Nephrol Dial Transplant 2006;21:1104-1108; Marckmann P, Skow L, Rossen H, Dupour A, Damholt MB, et al. Nephrogenic systemic fibrosis:

suspected causative role of gadodiamide used for contrast-enhanced magnetic resonance imaging. J Am Soc Nephrol 2006;17:2359-2362; Ting WW, Seabury-Stone M, Madison KC, Kurtz K. Nephrogenic fibrosing dermopathy with systemic involvement. Arch Dermatol 2003;139:903-906; Cowper SE, Robin HS, Steinberg SM, Su LD, Gupta S, LeBoit PE. Scleromyxoedema-like cutaneous diseases in renal-dialysis patients. Lancet 2000;356:1000-1001 (Shawn E Cooper was the first author to report on nephrogenic systemic fibrosis in the world's medical literature. He created and runs the international NSF-Registry, and he serves as the chairman of the Global Fibrosis Foundation Medical Advisory Council).

[2] Arsenault TM, King BF, Marsh JW Jr, Goodman JA, et al. Systemic gadolinium toxicity in patients with renal insufficiency and renal failure: Retrospective analysis of an initial experience. Mayo Clin Proc 1996;71:1150-1154;

[3] Rofsky NM, Weinreb JC, Bosniak MA, Libes RB, Birnbaum BA. Renal lesion characterization with gadolinium-enhanced MR imaging: efficacy and safety in patients with renal insufficiency. Radiology 1990;174:17-23.

[4] Khurana A, Runge VM, Narayanan M, Greene FJr, Nickel AE. Nephrogenic systemic fibrosis: a review of 6 cases temporally related to gadodiamide injection (Omniscan). Investigative Radiol 2007;42:139-145.

[5] De Martinis C, Rossini L. Some internal medicine and pharmacotoxicological clinical views and perspectives on global essentials, regionally protected, brand-name or unbranded equivalents, off-label and "me-too", neglected, repurposed, complementary, prescribed and/or distributed over-the-counter, differently marketed available or not counterfeit diagnostic, preventive and therapeutic medicinal products. Pharmacologyonline Newsletter 2010;2:475-496; Wetzels JFM. Thorotrast toxicity: the safety of gadolinium compounds. The Netherlands Journal of Medicine 2007;65:276-278.

[6] Hasebroock KM, Serkova NJ. Toxicity of MRI and CT contrast agents. Expert Opin Drug Metab Toxicol 2009;5:403-416 (88 References);

[7] Kadiyala D, Roer DA, Perazella MA. Nephrogenic systemic fibrosis associated with gadoversetamide exposure: Treatment with sodium thiosulfate. Am J Kidney Dis 2009;53:133-137; Wiginton CD, Kelly B, Oto A, Jesse M, Aristimuno P, et al. Gadolinium-based contrast exposure, nephrogenic systemic fibrosis, and gadolinium detection in tissue. Am J Roentgenol 2008;190:1060-1068; Thomsen HS. Is NSF only the tip Lameire N-of the "gadolinium toxicity" iceberg?. J Magn Reson Imaging 2008;28:284-286; Werman R, Altun E, Martin DR, Mitchell DG, Leyendecker JR, et al. Risk of nephrogenic systemic fibrosis: evaluation of gadolinium chelate contrast agents at four American universities. Radiology 2008;248:799-806; Shellock FG, Spinazzi A. MRI safety update 2008: part 1, MRI contrast agents and nephrogenic system fibrosis. Am J Roentgenol 2008;191:1129-1139; Rydahl C, Thomsen HS, Marckmann P. High prevalence of nephrogenic systemic fibrosis in chronic failure patients exposed to gadodiamide, a gadolinium-containing magnetic resonance contrast agent. Invest Radiol 2008;43:141-144; Thomsen HS, Marckmann P, Logager VB. Nephrogenic systemic fibrosis (NSF): a late adverse reaction to some

of the gadolinium based contrast agents. *Cancer Imaging* 2007;7:130-137; Perazella MA, Radby RA. Gadolinium use in patients with kidney disease; a cause for concern. *Semin Dial* 2007;20:179-185; Peak AS, Sheller A. Risk factors for developing gadolinium-induced nephrogenic systemic fibrosis. *Ann Pharmacother.* 2007;41:1481-1485; Bongartz G. Imaging in the time of NFD/NSF: do we have to change our routines concerning renal insufficiency? *MAGMA* 2007;20:57-62.

[8] Reilly RF. Risk of nephrogenic systemic fibrosis with gadoteridol (ProHance) in patients who are on long-term hemodialysis. *Clin J Am Soc Nephrol* 2008;3:747-751.

[9] National Italian Health Ministry Pharmacovigilance Project. Example, after regional decision no. 1180/2005, regarding a structured feedback of the ADRs reported on 21 December 2006 after a single intravenous injection of 15 ml Dotarem R in an epileptic patient (Report no. 69,739). Delivered 30 January 2007:1-3.

[10] Anonymous. U.S. Food and Drug Administration. FDA Drug Safety Newsletter. 19 Questions and answers on gadolinium-based contrast agents. August 13, 2001:1-4; Id. Postmarket Drug Safety Information for Patients and Providers. Information on gadolinium-containing contrast agents. May 23, 2007:1-2.

[11] Anonymous. European Medicines Agency makes recommendations to minimise risk of nephrogenic systemic fibrosis with gadolinium-containing contrast agents. Press Release November 19-20, 2009:1-2; Id. WHO Pharmaceuticals Newsletter 2009;6 & 2010;1:16.

[12] Hundley WG, Bluemke DA, Finn JP, Flamm SDE, Fogel MG, et al. ACCF/ACR/AHA/NASCI/SCMR 2010 Expert consensus document on cardiovascular magnetic resonance: A report of the American College of Cardiology Foundation Task Force on Expert Consensus Documents, *J Am Coll Cardiol* 2010;55:2614-2662; Id. *Circulation* 2010;121:2462-2508.

[13] Abdel-Kader K, Patel PR, Kallen AJ, Sinkowitz-Cochran RL, Bolton WK, Unruh ML. Nephrogenic systemic fibrosis: A survey of nephrologists' perceptions and practices. *Clin J Am Soc Nephrol* 2010;5:964-971.

[14] Abu-Aifa AK & Cowper S Organizers. Fourth Annual Symposium on Nephrogenic Systemic Fibrosis and Gadolinium-Based contrast agents. Reported by Stephan M, Presented by the Yale School of Medicine and The New York Academy of Sciences. Reported by Stephan M, Posted September 13, 2010 on the Web: See the full 13 pp eBriefing at www.nyas.org/NSF-eb; Siddiqi NH. Contrast medium reactions, recognition and treatment. *eMedicine Radiology* updated Sep 14, 2010:1-13; Anonymous. Nonionic intravenous contrast agents. *MR-Technology* 2010, September 2:1-4; Moriarty JM, Finn JP, Fonseca CG. Contrast agents used in cardiovascular magnetic resonance imaging: Current issues and future directions. *Am J Cardiovascular Drugs* 2010;10:227-237; Anonymous. Gadodiamide. Wikipedia 2010, January 30, h 3.29:1-3; Abujudeh HH, Kosaraju VK, Kaewlai R. Acute adverse reactions to gadopentetate dimeglumine and gadobenate dimeglumine: Experience with 32,659 injections. *Am J Roentgenol* 2010;194:430-434;

Attenberger UI, Runge VM, Morelli JN, Williams J, Jackson CB, Michaely HJ. Evaluation of gadobutrol, a macrocyclic, nonionic gadolinium chelate in a brain glioma model: comparison with gadoterate meglumine and gadopentetate dimeglumine at 1.5 T, combined with an assessment of field strength dependence specifically 1.5 versus 3 T. *J Magn Reson Imaging* 2010;31:549-555; Lalatonne Y, Monteil M, Jouni H, Serfaty JM, Sainte-Catherine O, et al. Superparamagnetic bifunctional biphosphonates nanoparticles: A potential MRI contrast agent for osteoporosis therapy and diagnostic. *J Osteoporosis* 2010; article ID 747852, 7 pages. Doi:10.4061/2010/747852; Moranne O, Willoteaux S, Pagniez D, Dequiedt P, Boulanger E. Effect of iodinated contrast agents on residual renal function in PD patients. *Medicine, Nephrology, Dialysis Transplantation* 2010;21:1040-1045; Weinreb JC, Abu-Alfa AK. Gadolinium-based contrast agents and nephrogenic systemic fibrosis: Why did it happen and what have we learned? *J Magn Reson Imaging* 2009;30:1236-1239; Bolus NE, George R, Washington J, Newcomer BR. PET/MRI: The blended-modality choice of the future?. *J Nuclear Medicine Technology* 2009;37:63-71; Canavese C, Mereu MC, Aime S, Lazzarich E, Fenoglio R, et al. Gadolinium associated nephrogenic systemic fibrosis: the need for nephrologists' awareness. *J Nephrol* 2009;1:324-336; Lee CU, Wood CM, Hesley GK, Leung N, Bridges MD, et al. Large sample of nephrogenic systemic fibrosis cases from a single institution. *Arch Dermatol* 2009;145:1095-1102; Prince MR, Zhang HL, Prowda JC, Grossman ME, Silvers DN. Nephrogenic systemic fibrosis and its impact on abdominal imaging. *RadioGraphics* 2009;29:1565-1574; Colletti PM. Reply. *Am J Roentgenol* 2009;192:1565-1574; Bridges MD, Amant BSS, McNeil RB, Cernigliaro JG, Dwyer JP, Fitzpatrick PM. High-dose gadodiamide for catheter angiography and CT in patients with varying degrees of renal insufficiency: Prevalence of subsequent nephrogenic systemic fibrosis and decline in renal function. *Am J Roentgenol* 2009;192:1538-1543; Ledneva E, Karie S, Launay-Vacher V, Janus N, Deray G. Renal safety of gadolinium-based contrast media in patients with chronic renal insufficiency. *Radiology* 2009;250:618-628; Schneider L. Disability Insurance Resource Centre. Moundy J. Symptoms of gadolinium toxicity? 2009, May 12:1; Perazella MA. Current status of gadolinium toxicity in patients with kidney disease. *Clin J Am Soc Nephrol* 2009;4:461-469; Kuefner MA, Feurler J, Uder M, Bautz W, Schwelberger HG. Influence of magnetic resonance contrast media on the activity of histamine inactivating enzymes. *Acad Radiol* 2009;16:358-362; Todd DJ, Kay J, Nephrogenic systemic fibrosis: an epidemic of gadolinium toxicity. *Curr Rheumatol Rep* 2008;10:195-204; Anonymous. Gadolinium side effects. *US Recall News* 2008 May 23/2010 September 2:1-24; Owens B. Getting help for your gadolinium toxicity symptoms. *Articlesbase* 2008, Sept 15:1-2; Anonymous. Methods of diagnosing and alleviating gadolinium toxicity. *FreshPatents.com* 2008;6.12:1-7; Gandhi MJ, Narra VR, Brown JJ, Guo A, Grosu DS, et al. Clinical and economic impact of falsely decreased calcium values caused by gadoversetamide interference. *Am J Roentgenol* 2008;190:W213-W217; Dillman JR, Ellis JH, Cohan RH, Strouse PJ, Jan SC. Allergic-like breakthrough reactions to gadolinium contrast agents after corticosteroid and antihistamine medication. *Am J Roentgenol* 2008;190:187-190; Id. Frequency and severity of acute allergic-like reaction to gadolinium-containing IV contrast media in children and adults. *Am J Roentgenol* 2007;189:1533-1538; Lameire N. Screening of renal function prior to administration of iodinated contrast medium. 2007;C212/V2:1-5, norbert.lameire@ugent.be; Viswamitra S, Shah SV. Nephrogenic systemic fibrosis, gadolinium, and iron mobilization. *New Eng J Med* 2007;357:720-722; Perazella MA. Nephrogenic systemic

fibrosis, kidney disease, and gadolinium: is there a link?. Clin J Am Soc Nephrol 2007;2:200-202; Wong CTC, Irwin MG. Contrast-induced nephropathy. Br J Anaesth 2007;99:474-483; Li A, Wong CS, Wong MK, Lee CM, Yeung MC. Acute adverse reactions to magnetic resonance contrast media-gadolinium chelates. Br J Radiol 2006;79:368-371; Akgun H, Gonlusen G, Cartwright JJr, Suki WN, Truong LD. Are gadolinium based contrast media nephrotoxic?. Arch Pathol Lab Med 2006;130:1354-1357; Ergün I, Keven K, Uruç I, Ekmekçi Y, Canbakan B, et al. The safety of gadolinium in patients with stage 3 and 4 renal failure, Nephrol Dial Transplant 2006;21:697-700; Prince HP, Erel HE, Lent RW, Blumenfeld J, Kent KC, Bush HL. Gadodiamide administration causes spurious hypocalcemia. Radiology 2003;227:639-646; Schenker MP, Solomon JA, Roberts DA. Gadolinium arteriography complicated by acute pancreatitis and acute renal failure. J Vascular Interventional Radiology. 2001;12:393; Runge VM. Safety of magnetic resonance contrast media. Top Magn Reson Imaging 2001;12:309-314; Unal O, Arlsan H. Cardiac arrest caused by IV gadopentetate dimeglumine. Am J Roentgenol 1999;172:1141; Murphy KJ, Brunberg JA, Cohan RH. Adverse reactions to gadolinium contrast media: a review of 36 cases. Am J Roentgenol 1996;167:847-849.

[15] Italian Health Ministry. AIFA public competition, 2008, List of topics and motivations, Area B: "Pharmacoepidemiological investigations regarding the benefit-risk profile of treatments and studies of the impact of improvement strategies of treatment appropriateness. B 2: Evaluation of adverse events related to administration of diagnostic or therapeutic contrast agents and radio-drugs. Note: reference is made to adequately sized clinical trials evaluating relatively rare ADRs. Studies conducted in paediatric populations will be considered of special interest. Motivation of the proposed topic: Contrast agents and radio-drugs, particularly iodinate ones, are widely used in diagnostic procedures. Doubts have recently been expressed from several quarters with regard to their safety, especially in terms of renal toxicity and hypersensitivity reactions (the latter sometimes involving lethal outcomes). To date there are no sufficient comparative data on the safety of contrast agents".

[16] Wadas T, Sherman CD, Miner JH, Duncan JR, Anderson CJ. The biodistribution of [¹⁵³Gd]Gd-labeled magnetic resonance contrast agents in a transgenic mouse model of renal failure differs greatly from control mice. Magn Res in Medicine. Published online July 20, 2010; Mikiciuk-Olasik E, Wojewoda E, Bilichowski I, Witczak M, Karwoski B, et al. Determination of stability constants and acute toxicity of potential hepatotoxic gadolinium complexes. Acta Poloniae Pharmaceutica 2010;67:119-127; Goffin E, Schroeder JA, Weingart C, Decleire PY, Cosyns JP. Absence of gadolinium deposits in the peritoneal membrane of patients with encapsulating peritoneal sclerosis. Nephrol Dial Transplant 2010;25:1334-1339; Künnemeyer J, Terborg L, Nowak S, Brauckmann C, Telgmann L, et al. Quantification and excretion kinetics of a MRI contrast agent by capillary electrophoresis-mass spectrometry (CE-MS). Electrophoresis 2009;30:1766-1773; Künnemeyer J, Terborg L, Meermann B, Brauckmann C, Möller I, Scheffer A, Karst U. Speciation analysis of gadolinium chelates in hospital effluents and wastewater treatment plant sewage by a novel HLIC/ICR-MS method. Environ Sci Technol 2009;15:2884-2890; Perazella MA. Renal vulnerability to drug toxicity. Clin J Am Soc Nephrol 2009;4:1275-1283; Vaidya VS, Ferguson MA, Bonventre JV. Biomarkers of acute kidney injury. Ann Rev Pharmacol Toxicol 2008;48:495-535; Peldschus K, Hamdorf M, Robert P, Port M, Graessner J, et

al. Contrast-enhanced magnetic resonance angiography: evaluation of the high relaxivity low diffusible gadolinium-based contrast agent P846 in comparison with gadoterate meglumine in rabbits at 1.5 Tesla and 3.0 Tesla. *Investigative Radiology* 2008;43:837-842; Mendichovszky I, Pedersen M, Frøkjaer J, Dissing T, Grenier N, et al. How accurate is dynamic contrast-enhanced MRI in the assessment of renal glomerular filtration rate? A critical appraisal. *J Magn Res Imaging* 2008;27:925-931; Boss A, Martirosian P, Gehrman M, Artunc F, Risler T, et al. Quantitative assessment of glomerular filtration rate with MR gadolinium slope clearance measurements: A phase I trial. *Radiology* 2007;242:783-790; Heinrich MC, Kuhlmann MK, Kolbacher S, Scheer M, Grgic A, et al. Cytotoxicity of iodate and gadolinium-based contrast agents in renal tubular cells at angiographic concentrations: in vitro study. *Radiology* 2007;242:425-434 (52 References); Barfuss H, Fischer H, Hentschel D, Ladebeck D, Oppeit A, et al. In vivo magnetic resonance imaging and spectroscopy of humans with a 4 t whole-body magnet. Article first published online October 21, 2005. *NMR in Biomedicine* 1990;3:31-45; Bartolini ME, Pekar J, Scott A, Sykes J, Prato FS, Moran GR. An investigation of the toxicity of gadolinium based MRI contrast agents using neutron activation analysis. *Magnetic Resonance Imaging* 2003;21:541-544; Moran GR, Pekar J, Bartolini M, Chettle DR, McNeill F, Scott A, Gibbons J, Prato FS. An investigation of the toxicity of gadolinium based MRI contrast agents. *Proc Int Soc Magn Reson Med* 2002 (10); Palasz A, Czekaj T. Toxicological and cytophysiological aspects of lanthanides. *Acta Biochimica Polonica* 2000;47:1107-1114; Spencer A, Wilson S, Harpur E. Gadolinium chloride toxicity in the mouse. *Human Exp Toxicol* 1998;17:633-637; Spencer AJ, Wilson SA, Batchelor J, Reid A, Pees J, Harpur E. Gadolinium chloride toxicity in the rat. *Toxicol Pathol* 1997;25:245-32556; Koop DE, Klopfenstein B, Iimuro Y, Thurman RG. Gadolinium chloride blocks alcohol-dependent liver toxicity in rats treated chronically with intragastric alcohol despite the induction of CYP2E1. *Mol Pharmacol* 1997;51:944-950; Vogler H, Platzek J, Schuhmann-Giampieri, Frenzel T, Weinmann H-J, et al. Pre-clinical evaluation of gadobutrol: a new, neutral, extracellular contrast agent for magnetic resonance imaging. *Eur J Radiol* 1995;21:1-10; Roch A, Bach-Gansmo T, Muller RN. In vitro relaxometric characterization of superparamagnetic contrast agents. *MAGMA* 1993;1:83-88; Walker RJ, Duggin GG. Drug nephrotoxicity. *Ann Rev Pharmacol Toxicol* 1988;28:331-345; Morris TW, Fischer HW. The pharmacology of intravascular radiocontrast media. *Ann Rev Pharmacol Toxicol* 1986;26:143-160.

[17] Bradu D, Rossini L. Contrast agents – Iodinated products. Second WHO-ITA/ITA-OMS 2010 contribution on aggregate WHO system-organ class disorders and/or clustering based on reported adverse reactions/events. *Pharmacologyonline Newsletter* 2010;2:727-753; Bernardi M, Bradu D, Di Sarra B, Galeazzi G, Marcucci M, Montecchiani G, Moretti V, Moroni L, Re L, Rossini L, Rossini P, Tonnini C. Ionic and nonionic contrast agents. A contribution by WHO-ITA and The Drug Documentation and Information Centre of Regione Marche. *Pharmacologyonline Newsletter* 2010;2:497-517.

[18] Rofsky NM, Sherry AD, Lenkinski RE. Nephrogenic systemic fibrosis: A chemical perspective. *Radiology* 2008;247:608-612 (Lenkinski RE: Physicochemical properties of GBCA and their association with NSF: 36 slides presentation); Port M, Idée J-M, Medina C, Robic C, Sabatou M, Corot C. Efficiency, thermodynamic and kinetic stability of marketed gadolinium chelates and their possible clinical consequences: a critical review. *BioMetals* 2008;21:469-490

(99 References); Idée J-M, Port M, Medina C, Lancelot E, Fayoiux E, Ballet S, Corot C. Possible involvement of gadolinium chelates in the pathophysiology of nephrogenic systemic fibrosis: A critical review. *Toxicology* 2008;248:77-88; Frenzel T, Lengsfeld P, Schirmer H, Hutter J, Weinmann HJ. Stability of gadolinium-based magnetic resonance imaging contrast agents in human serum at 37 degrees C. *Invest Radiol* 2008;43:817-828 (50 References); Penfield JG, Reilly RFJr. What nephrologists need to know about gadolinium. *Nature Clinical Practice Nephrology* 2007;3:654-668; Idée J-M, Port M, Raynal I, Schaefer M, Le Greneur S, Corot C. Clinical and biological consequences of transmetallation induced by contrast agents: a review. *Fundam Clin Pharmacol* 2006;20:563-576; Knoop MV, Tengg-Kobligk H, Floemer F, Schoenberger SO, Contrast agents for MRA: future directions. *J Magn Res Imaging* 1999;10:314-316; Imura H, Choppin GR, Cacheris WP, de LKearle LA, Dunn TJ, White DH. Thermodynamics and NMR studies of DTPA-bis(methoxyethylamide) and its derivatives. Protonation and complexation with Ln(III). *Inorganica Chimica Acta* 1997;258:227-236; Sherry AD, Ren J, Huskens J, Brucher E, Tòth E, et al. Characterization of Lanthanide(III) DOPT complexes: Thermodynamics, protonation, and coordination to alkali metal ions. *Inorg Chem* 1996;35:4604-4612; Puttagunta NR, Gibby WA, Puttagunta VL. Comparative transmetallation kinetics and thermodynamic stability of gadolinium-DTPA Bis-glucosamide and other magnetic resonance contrast media. *Investigative Radiology* 1996;31:619-624; Wedeking P, Kumar K, Tweedle MF. Dissociation of gadolinium chelates in mice: relationship to chemical characteristics. *Magn Reson Imaging* 1992;10:641-648; Cacheris WP, Quay SC, Rocklage SM. The relationship between thermodynamics and the toxicity of gadolinium complexes. *Magn Reson Imaging* 1990;8:467-481.

[19] Gamba G, Leone L, Re L, Roda L, Rossini L, Battistini A. Inibizione della digestione di albumina monomera nativa e denaturata da farmaci antiinfiammatori non steroidei. *Rivista Farmacol Ter* 1976;7:217-228; Al Safair A, Bonsignore F, Moretti V, Piantelli F, Re L, Rossini L. Spectrophotometric analysis of thermal stability of hetastarch. *Nuovo Boll Farmacol Clinica* 1989;12:174-181;

[20] Shaw DE, Maragakis P, Lindorff-Larsen K, Piana S, Dror RO, et al. Atomic-level characterization of the structural dynamics of proteins. *Science* 2010;330:341-346; Korzhnev DM, Religa TL, Banachewicz W, Fersht AR, Kay LE. A transient and low-populated protein-folding intermediate at atomic resolution. *Science* 2010;329:1312-1316; Al-Hashimi HM. Exciting structures. *Science* 2010;329:1295-1296;

[21] Rossini L. Drugs and the future. *Pharmacologyonline* 2005;1:12-44;

[22] Thomson KR. Safe use of radiographic contrast media. *Australian Prescriber* 2010;33:19-22; Katzberg R, Newhouse JH. Intravenous contrast medium-induced nephrotoxicity: is the medical risk as great as we have come to believe?. *Radiology* 2010;256:21-28; Ferner RE, Aronson JK. Farmacogenetica e reazioni indesiderate da farmaci. *Adverse Drug Reaction Bulletin* It Ed by WHO-ITA/ITA-OMS 2010;197:789-792; Ferner RE. ABCB1(glicoproteina-P) e farmacologia clinica delle reazioni indesiderate da farmaci. *Adverse Drug Reaction Bulletin* It Ed by WHO-ITA/ITA-OMS 2010;196:785-788; Hunt CH, Hartman RP, Hesley GK. Frequency and severity of adverse effects of iodate and gadolinium contrast materials: retrospective review of 456,930 doses.

Am J Roentgenol 2009;193:1124-1127; Schoepf UJ, Costello P. Response. Radiology 2009;251:615-616; Cohen MD. Is the use of intravenous contrast material truly safe in patients with impaired renal function? Radiology 2009;251:613-615; Halvorsen RA. Which study when? Iodinated contrast-enhanced CT versus gadolinium-enhanced MR imaging1. Radiology 2008;249:9-15; Weinreb JC. Which study when? Is gadolinium-enhanced MR Imaging safer than iodine-enhanced CT?. Radiology 2008;249:3-8; Nguyen SA, Suranyi P, Ravenel JG, Randall PK, Romano PB et al. Iso-osmolality versus low-osmolality iodinated contrast medium at intravenous contrast-enhanced CT: Effect on kidney function. Radiology 2008;248:97-105; Nyman U, Elmståhl B, Nillson M. The dogma that gadolinium contrast media are less nephrotoxic than iodine agents for X-ray angiography is a misconception. Heart and Vessels 2007;22:211-213; Nyman U, Elmståhl B, Leander P. Suggesting gadolinium-based contrast media for CT in azotemic patients is not based on historical, clinical, and experimental data. Radiology 2007;244:622-623; Heinrich MC, Kuhlmann MK, Kolbacher S, Scheer M, Grgic A, et al. Cytotoxicity of iodate and gadolinium-based contrast agents in renal tubular cells at angiographic concentrations: in vitro study. Radiology 2007;42:425-434 (52 References); Rao QA, Newhouse JH. Risk of nephropathy after intravenous administration of contrast material: A critical literature analysis. Radiology 2006;239:392-397; Solomon R. The role of osmolality in the incidence of contrast-induced nephropathy: A systematic review of angiographic contrast media in high risk patients. Kidney Int 2005;68:2256-2263; Spinosa DJ, Kaufmann JA, Hartwell DG. Gadolinium chelates in angiography and interventional radiology: A useful alternative to iodate contrast media for angiography. Radiology 2002;223:319-325; Nyman U, Elmståhl B, Leander P, Nillson M, Golman K, Almèn T. Are gadolinium-based contrast media really safer than iodinated media for digital subtraction angiography in patients with azotemia?. Radiology 2002;223:311-318; Cochran ST, Bomyea K, Sayre JW. Trends in adverse events after IV administration of contrast media. Am J Roentgenol 2001;176:1385-1388;

[23] Sharma SK. Iodinated contrast media and contrast-induced nephropathy: is there a preferred cost-effective agent? J Invasive Cardiology 2008;20:245-248;

[24] Burke A. Confronting malnutrition with science. The New York Academy of Sciences Magazine Autumn 2010;12, 19-25; Friedman CP, et al. ScienceTranslational Medicine Commentary: Achieving a nationwide learning health system. Science 2010;330:888;

[25] Rappaport SM, Smith MT. Environment and disease risks. Science 2010;330:460-461;

[26] Estrin D, Sim I. Open mHealth Architecture: An engine for health care innovation. Science 2010;330:759-760;

[27] Kaufman L, Rousseeuw P J. Finding Groups in Data. An Introduction to Cluster Analysis. John Wiley 1990.