Escala de avaliação de causalidade RUCAM-CIOMS

Objetivo: Avaliar probabilidade de a lesão hepática ser provocada por agente tóxico

Variáveis, cálculo e interpretação:



Items for Hepatocellular Injury	Score	Result
Time to onset from the beginning of the drug/herb		
5-90 days (rechallenge: 1-15 days)	+2	
<5 or >90 days (rechallenge: >15 days)	+1	
Alternative: Time to onset from cessation of the drug/herb		
 ≤15 days (except for slowly metabolized chemicals: >15 days) 	+1	0
2. Course of ALT after cessation of the drug/herb		
Percentage difference between ALT peak and N		
 Decrease ≥ 50% within 8 days 	+3	0
 Decrease ≥ 50% within 30 days 	+2	0
No information or continued drug use	0	0
 Decrease ≥ 50% after the 30th day Decrease < 50% after the 30th day or recurrent increase 	-2	0
 Risk factors Alcohol use (current drinks/d: >2 for women, >3 for men) 	+1	п
Alcohol use (current drinks/d: ≤2 for women, ≤3 for men)	0	0
Age ≥ 55 years	+1	0
Age < 55 years	0	0
4. Concomitant drug(s)/herb(s)		
None or no information	0	
 Concomitant drug/herb with incompatible time to onset 	0	0
 Concomitant drug/herb with compatible or suggestive time to onset 	-1	0
 Concomitant drug/herb known as hepatotoxin and with compatible or suggestive time to 	-2	п
onset delete marking right side above	-2	u
 Concomitant drug/herb with evidence for its role in this case (positive rechallenge or validated test) 	-3	а
5. Search for alternative causes	Tick if negative	Tick if not dor
Group I (7 causes)	negative	
HAV: Anti-HAV-IgM	0	0
 Hepatobiliary sonography / colour Doppler 	0	0
HCV: Anti-HCV, HCV-RNA	0	0
HEV: Anti-HEV-IgM, anti-HEV-IgG, HEV-RNA	0	
 Hepatobiliary sonography/colour Doppler sonography of liver vessels/ 	n	n
endosonography/CT/MRC		_
 Alcoholism (AST/ALT ≥ 2) 	0	
Acute recent hypotension history (particularly if underlying heart disease)		0
Group II (5 causes) Complications of underlying disease(s) such as sepsis, metastatic malignancy, autoimmune		
	D	0
hepatitis, chronic hepatitis B or C, primary biliary cholangitis or sclerosing cholangitis, genetic liver diseases		0
Infection suggested by PCR and titer change for		
CMV (anti-CMV-lgM, anti-CMV-lgG)	0	D
EBV (anti-EBV-IgM, anti-EBV-IgG)	0	0
 HSV (anti-HSV-IgM, anti-HSV-IgG) 	0	0
 VZV (anti-VZV-IgM, anti-VZV-IgG) 	0	0
Evaluation of groups I and II		
All causes-groups I and II—reasonably ruled out	+2	
The 7 causes of group I ruled out	+1	
6 or 5 causes of group I ruled out	0	0
Less than 5 causes of group I ruled out	-2 -3	0
Alternative cause highly probable	-3	0
6. Previous hepatotoxicity of the drug/herb	. 0	0.00
Reaction labelled in the product characteristics Reaction published but unlabelled	+2	0
Reaction published but unlabelled Reaction unknown	+1	0
	U	U
7. Response to unintentional reexposure		
 Doubling of ALT with the drug/herb alone, provided ALT below 5N before reexposure 	+3	0
Doubling of ALT with the drug(s) / herb(s) already given at the time of first reaction	+1	0
 Increase of ALT but less than N in the same conditions as for the first administration Other situations 	-2 0	0
Criter situations	0	0
		0

Items for Cholestatic or Mixed Liver Injury	Score	Result
Time to onset from the beginning of the drug/herb		
 5–90 days (rechallenge: 1–90 days) 	+2	0
 <5 or >90 days (rechallenge: >90 days) 	+1	0
Alternative: Time to onset from cessation of the drug/herb		
 (except for slowly metabolized chemicals: ≤30 days) 	+1	0
Course of ALP after cessation of the drug/herb		
Percentage difference between ALP peak and N		
 Decrease ≥ 50% within 180 days 	+2	0
 Decrease < 50% within 180 days 	+1	0
 No information, persistence, increase, or continued drug/herb use 	0	0
3. Risk factors		
 Alcohol use current drinks/d: >2 for women, >3 for men) 	+1	0
 Alcohol use (current drinks/d: ≤2 for women, ≤3 for men) 	0	0
 Pregnancy Age ≥ 55 years 	+1	0
Age ≤ 55 years Age < 55 years	0	0
Concomitant use of drug(s)/herb(s) None or no information	0	D
None or no information Concomitant drug/herb with incompatible time to onset	0	0
Concomitant drug/herb with incompatible time to onset Concomitant drug/herb with compatible or suggestive time to onset	-1	0
Concomitant drug/herb known as hepatotoxin and with compatible or		-
suggestive time to onset	-2	0
 Concomitant drug/herb with evidence for its role in this case (positive 	-3	D
rechallenge or validated test)	-0	
5. Search for alternative causes	Tick if	Tick if not
	negative	done
Group I (7 causes)		
HAV: Anti-HAV-IgM	0	D
HBV: HBsAg, anti-HBc-IgM, HBV-DNA HCV: Anti-HCV HCV PNA	0	0
 HCV: Anti-HCV, HCV-RNA HEV: Anti-HEV-IgM, anti-HEV-IgG, HEV-RNA 	0	
Hepatobiliary sonography/colour Doppler sonography of liver	0.70	
vessels/endosonography/CT/MRC	0	0
 Alcoholism (AST/ ALT ≥ 2) 	0	0
 Acute recent hypotension history (particularly if underlying heart 	0	D
disease)	0	0
Group II (5 causes)		
 Complications of underlying disease(s) such as sepsis, metastatic 		
malignancy, autoimmune hepatitis, chronic hepatitis B or C, primary biliary	0	0
cholangitis or sclerosing cholangitis, genetic liver diseases Infection suggested by PCR and titer change for		
CMV (anti-CMV-IgM, anti-CMV-IgG)	0	n
EBV (anti-EBV-IgM, anti-EBV-IgG)	0	
HSV (anti-HSV-IgM, anti-HSV-IgG)	0	0
 VZV (anti-VZV-IgM, anti-VZV-IgG) 	0	0
Evaluation of group I and II		
 All causes—groups I and II—reasonably ruled out 	+2	D
The 7 causes of group I ruled out	+1	0
6 or 5 causes of group I ruled out	0	D
Less than 5 causes of group I ruled out	-2 -3	0
Alternative cause highly probable	-3	0
6. Previous hepatotoxicity of the drug/herb		
Reaction labelled in the product characteristics	+2	0
Reaction published but unlabelled Reaction unknown	+1	0
	J	
7. Response to unintentional reexposure		
Doubling of ALP with the drug/herb alone, provided ALP below 2N here recommends.	+3	0
 before reexposure Doubling of ALP with the drugs(s)/herbs(s) already given at the time of 		
Doubling of ALP with the drugs(s)/heros(s) already given at the time of first reaction	+1	0
Increase of ALP but less than N in the same conditions as for the first		
administration	-2	0
	0	D
Other situations		

Total score:

0 excluded causality
1–2 unlikely
3–5 possible
6–8 probable
>9 highly probable

Danan G, Teschke R. RUCAM in drug and herbinduced liver injury: the update. Int J Mol Sci 2015;17:E14.

Calculador automático:

https://www.rccc.eu/scores/RUCAM.html