

Adverse effects and their management in patients with pulmonary fibrosis treated with nintedanib

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INTRODUCTION

Nintedanib slows lung-function decline in pulmonary fibrosis, yet adverse events often require dose changes; identifying incidence and predictors matters clinically.

OBJECTIVES

- **Evaluate** the incidence and risk factors associated with adverse events related to nintedanib treatment in patients with **pulmonary fibrosis**.
- **Determine** whether efficacy, measured by forced vital capacity (FVC) and carbon monoxide diffusion capacity was (DLCO) maintained throughout follow-up.

MATERIALS AND

- Observational, retrospective, single-center study
- Patient with pulmonary fibrosis who initiated nintedanib treatment between July 2024 and July 2025.
- Demographic and clinical variables were collected: age, sex, smoking status, oxygen therapy, carb flour use, bodymass index (BMI), FVC, Dlco and study of the adverse reactions.
- T-student was applied for qualitative variables and chi-square test for qualitative ones.

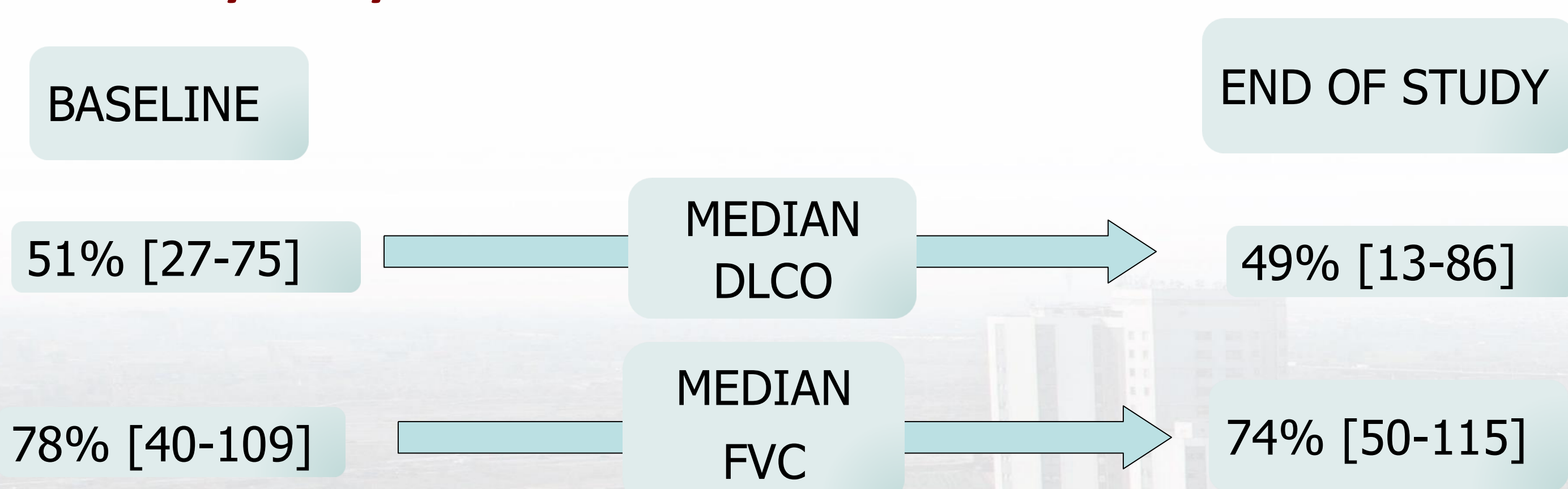
RESULTS



97 patients treated with Nintedanib

- 64 women
- Mean age 71 years old [39-88]
- Median BMI was 28 [19-51]
- 65% history of smoking
- 29% oxygen therapy

Efficacy analysis

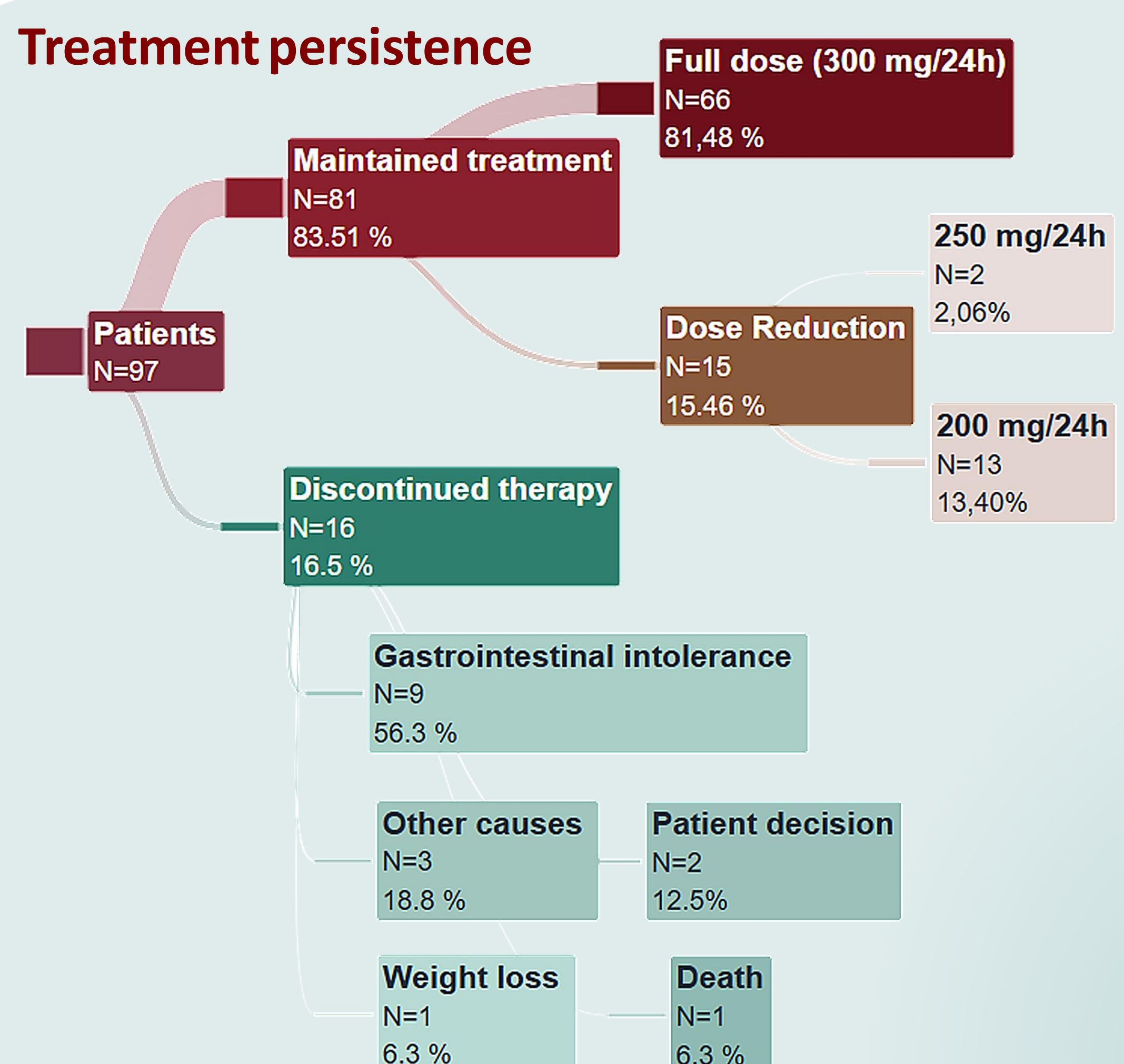


Adverse effects during treatment

Adverse events	Number	Incidence
Gastrointestinal reactions	59	60.8%
Diarrhea	52	53.61%
Nausea	15	15.46%
Hepatic enzyme alterations	35	36.1%

38.14% of Patients needed to include carb flour in their diet

Treatment persistence



Correlation analysis

- ✓ BMI and hepatic enzyme alterations showed a significant inverse correlation ($p = 0.045$)
- ✓ Lower BMI was associated with more hepatic profile alteration.
- ✗ No other significant associations were found between clinical or demographic variables.

CONCLUSIONS

During nintedanib therapy, active monitoring and management of adverse events are essential to sustain the treatment persistence. Among the variables analyzed, body mass index (BMI) was the only factor significantly associated with adverse events. FVC and DLco values showed a modest decline during follow-up.

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