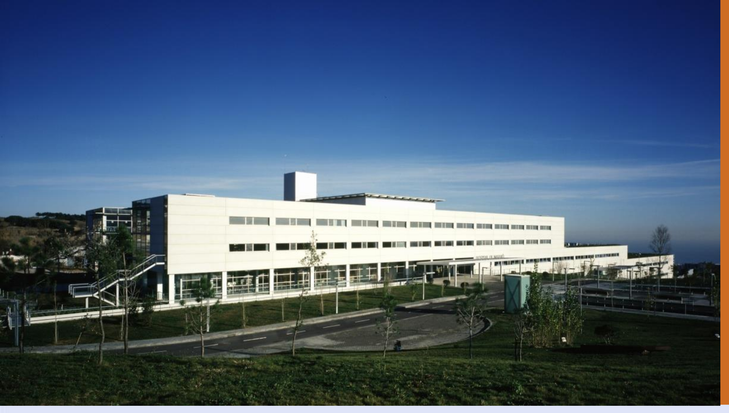

EVALUATION OF THE EFFECTIVENESS AND SAFETY OF PIRFENIDONE AND NINTEDANIB IN IDIOPATHIC PULMONARY FIBROSISM

Q.Moreno,V. Garcia, M. Miarons, S.Marin, A.Sanchez, M.Camps, L. Campins, C. Agustí, D. Lopez.
Hospital Mataró, Pharmacy, Mataró, Spain.

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Background

Idiopathic pulmonary fibrosis (IPF) is a progressive idiopathic interstitial lung disease with poor prognosis. Patients with IPF have a poor quality of life and a median survival time of about 3 years. In the last years there was a breakthrough in the treatment of IPF. With pirfenidone and nintedanib there are now two drugs approved for the treatment of IPF.
Although nintedanib is not yet marketed in the European Union the manufacturing lab has an extended program that allows its use.

Pirfenidone and nintedanib are indicated for mild to moderate IPF.

Objectives

To evaluate the effectiveness and safety of pirfenidone and nintedanib in patients with IPF.

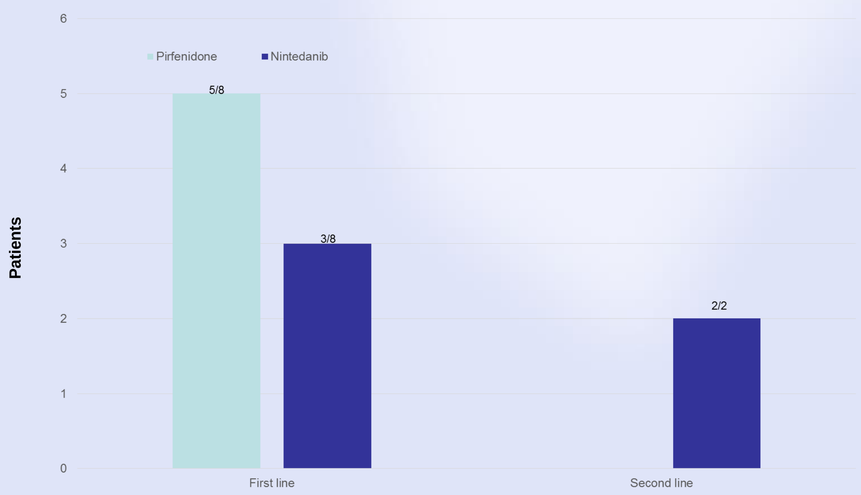
Material and methods

A retrospective observational analysis of the use of pirfenidone and nintedanib in our hospital from 2014 to October 2015 was conducted. Variables included demographic (age,sex) and clinical data(previous treatment, side effects, and clinical outcome).

Adverse drug reaction (ADRs) were compiled in relation to safety.

Results

Eight patients were included in the study (six men and two women) with a mean age of 69 years. Five patients were treated with pirfenidone, two of them stopped and continued a second line treatment with nintedanib. One of them because phototoxicity after 8 month taking pirfenidone and the other one because significant deterioration of forced vital capacity (FVC). These five patients didn't present digestive disturbances or increase transaminases. Five patients received nintedanib, two of them as a second line and three as a first line. One couldn't received pirfenidone due to glomerular filtration <30ml/min. Two patients had to reduce dosage down to 100mg BID due to digestive disturbances (nausea and diarrhea) and one of them had to discontinue treatment. Only two patients didn't present any digestive disturbances. And any presented increase transaminases.
Only two patients have been in treatment long enough to have follow up data for 6 months. One with pirfenidone an other one with nintedanib. After six months of treatment FVC experienced less than 10% decrease (4% and 5% respectively) and diffusing capacity or transfer factor of the lung for carbon monoxide (DLCO) incresed by 1% each.



FVC (%)	Drug	Basal	3 months	6 months	Diference	%
Patient 1	Pirfenidone	71,8	69,3	68,8	-3	-4,17
Patient 2	Nintedanib	92	90,9	87,4	-4,6	-5
Patient 3	Pirfenidone	56,5	52,3	-	-4,2	-7,43

Conclusions

Due to the short follow up period, we can't establish effectiveness yet.
The ADRs cause discontinuation of treatment of two patients, so close monitoring is required.

References

- Aravena C, Labarca G, Venegas C, ArenasA, Rada G (2015) *Pirfenidone for Idiopathic Pulmonary Fibrosis: A Systematic Review and Meta-Analysis*. PLoS ONE 10(8): e0136160. doi:10.1371/journal.pone.0136160
- Corte et al. *Respiratory Research* (2015) 16:116 DOI 0.1186/s12931-015-0276-5

HOSPITAL DE MATARÓ
mmorenogi@csdm.cat

eahp european association of hospital pharmacists

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