## **EFFICACY AND SAFETY OF HIGH-DOSE TWICE** WEEKLY SEBELIPASE ALFA IN SEVERE-ONSET WOLMAN DISEASE: A CASE REPORT

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Case studies - with patient consent



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## **BACKGROUND AND IMPORTANCE**

Lysosomal-acid-lipase (LAL) deficiency is a rare metabolic disease (0.2:10,000) characterized by lysosomal accumulation of cholesterol

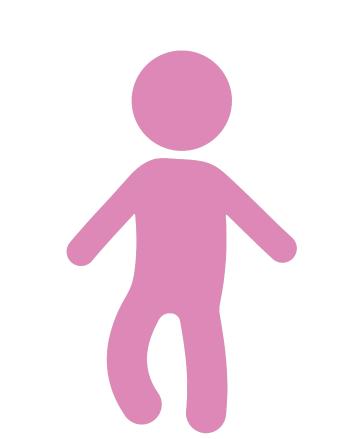
esters and triglycerides, with a severe and rapidly progressive form, Wolman Disease (WD), usually fatal in the first 6-12 months of life.

Sebelipase-alfa (SA) is a recombinant human LAL administered weekly, initially at 1 mg/kg, with a gradual increase according to response, thus avoiding serious hypersensitivity reactions. Twice weekly dosing with rapid escalation had not been previously described.

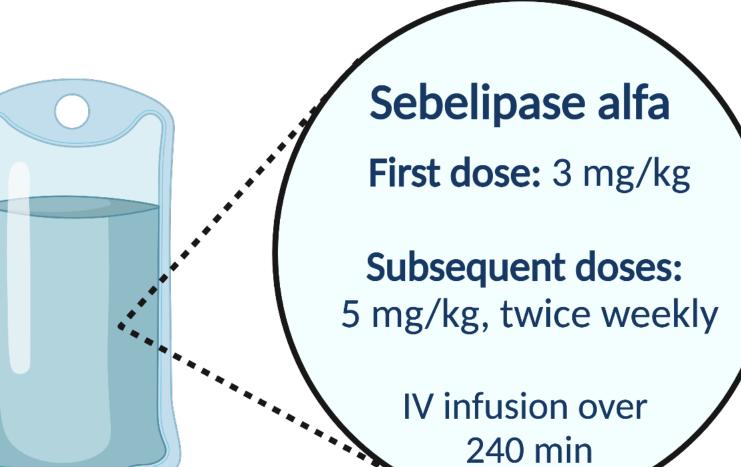
## **OBJECTIVE**

To describe the **efficacy** and **safety** of high dose SA administered **twice weekly** in severe onset WD.

**METHODS** 



- **Diagnosis**: **WD** with secondary **hemophagocytic syndrome**.
- Admission to **paediatric critical care unit**.
- Since admission: anaemia, thrombocytopenia, hyperferritinemia, altered liver function tests and lipid profile, and massive hepatosplenomegaly.

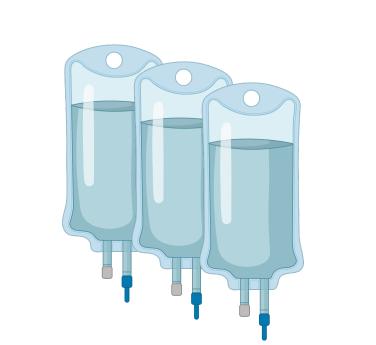






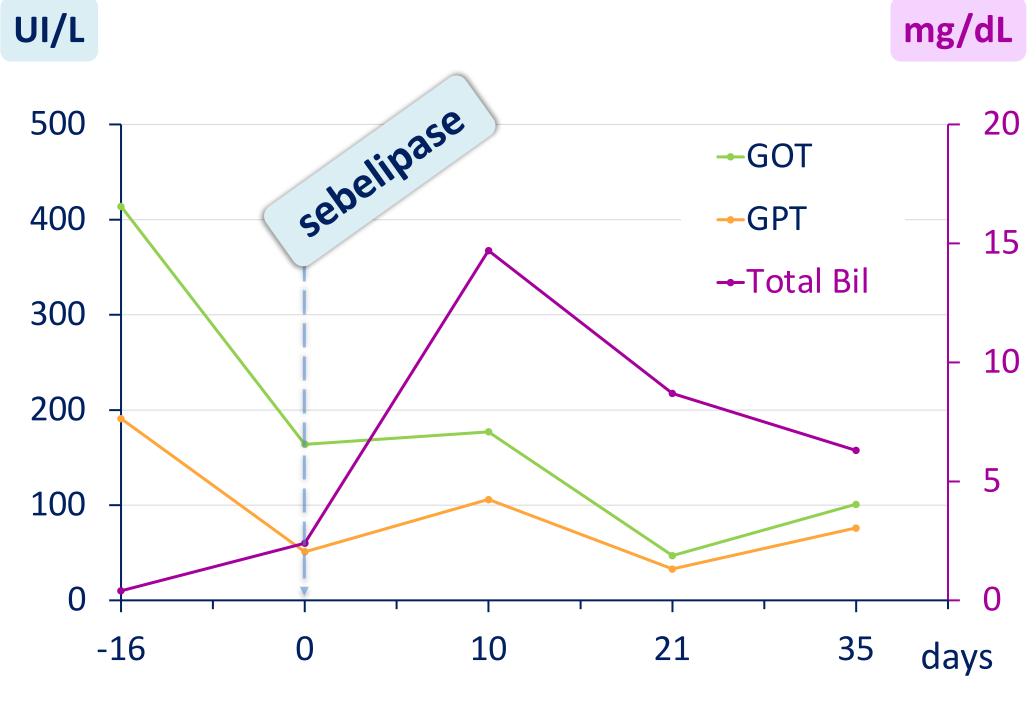
**Rapid** deterioration and **critical** situation, with severe **respiratory** and **kidney failure** → High dose **SA** was started

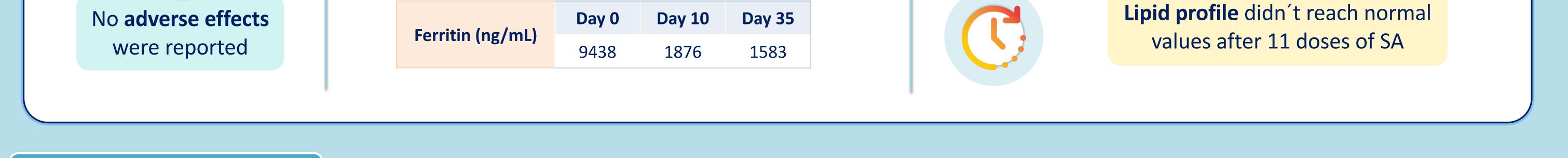




**11 doses** of **sebelipase** alfa over 35 days









Mechanical ventilation and continuous **hemodiafiltration:** required for 2.5 weeks



**Red blood cell** and **platelet** transfusions were needed repeatedly up to day +24



A reduction in hepatosplenomegaly





Treatment with high-dose twice weekly SA has been an effective and well-tolerated therapy in an aggressive and severe presentation of WD so far, although it is necessary to maintain enzyme replacement for life

