

# PREDICTIVE VALUE OF THE ARCTIC SCORE AND ESTIMATED GLOMERULAR FILTRATION RATE EQUATIONS ON LEVETIRACETAM PLASMA CONCENTRATIONS IN CRITICALLY ILL NEUROTRAUMA PATIENTS

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## BACKGROUND AND IMPORTANCE

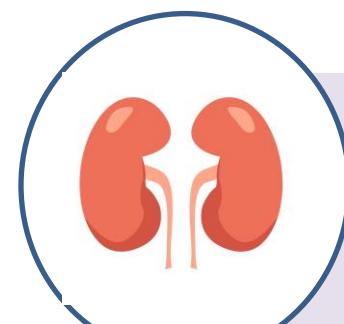
Achieving optimal drug exposure can be challenging in neurocritical patients with **augmented renal clearance (ARC)**

## AIM AND OBJECTIVES

To evaluate the accuracy of the **Augmented Renal Clearance in Trauma Intensive Care (ARCTIC)** score and different **estimated glomerular filtration rate (eGFR)** equations in predicting the variability of **levetiracetam plasma trough concentrations (CpLEV)** in critically ill patients.

## MATERIAL AND METHODS

Observational study in neurocritical patients → **levetiracetam treatment + assessment of CpLEV** October 2019 - May 2024



eGFR was calculated using several equations: CKD-EPI, MDRD-6, and Cockcroft-Gault (C-G)



**Therapeutic range of levetiracetam: 10-40 µg/mL (internal protocol)**

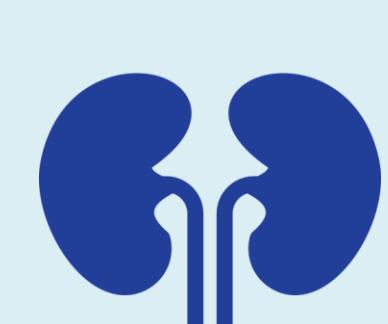
**ARCTIC score ≥6 was used to predict ARC**

Statistical analyses included ANOVA, Fisher-Snedecor F-distribution, and multivariate logistic regression (SPSS® v25)

## RESULTS



**46 critically ill patients (34 males, 74%)**  
Age: mean 56 years (range: 20-85)  
BMI: mean 27 kg/m<sup>2</sup> (range: 15-38)



### Levetiracetam doses

- 500 mg/BID: 10 patients (22%)
- 1000 mg/BID: 28 patients (61%)
- 1500 mg/BID: 8 patients (17%)

### eGFR estimations

**CKD-EPI:** Mean 106 (SD:31) mL/min/1.73m<sup>2</sup>

**MDRD-6:** Mean 135 (SD:65) mL/min/1.73m<sup>2</sup>

**Cockcroft-Gault (C-G):** Mean 114 (SD:50) mL/min/1.73m<sup>2</sup>

### Analyzed covariates

Age    Sex    BMI    Administration route    Dose    eGFR



- Dose** ( $p<0.001$ ) and **eGFR** ( $p<0.002$ ) significantly affected **CpLEV**

### GFR contribution to CpLEV variability:



- CKD-EPI: 26.3%
- MDRD-6: 22.3%
- C-G: 23.2%

### Probability of SUBtherapeutic CpLEV:

- eGFR >115 mL/min (CKD-EPI):** Sensitivity 83.3%, Specificity 62.5% ( $p=0.002$ )
- ARCTIC Score ≥6:** Sensitivity 76.0%, Specificity 42.9% ( $p=0.174$ )



## CONCLUSION AND RELEVANCE

- ✓ CKD-EPI is the eGFR equation that most accurately explains the **variability in CpLEV**.
- ✓ A significant percentage of patients had **subtherapeutic CpLEV values**, which correlated well with an **eGFR>115 ml/min according to CKD-EPI**.
- ✓ The **clinical utility of ARCTIC score predicting subtherapeutic CpLEV remains limited**, although it suggests a possible association.

