STUDY OF EFFECTIVENESS AND SAFETY OF FOSCARNET IN CYTOMEGALOVIRUS TREATMENT IN HEMATOPOIETIC STEM CELL TRANSPLANTATION RECIPIENTS

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BACKGROUND

Cytomegalovirus (CMV) disease is an important reason of morbidity and mortality in hematopoietic stem cell transplantation (HSCT) recipients. Foscarnet represents an alternative increasingly widespread when appears resistance or intolerance to conventional treatments.

PURPOSE

To analyse the effectiveness and safety of foscarnet against CMV in HSCT recipients and the adaptation to clinical practise guidelines and experts recommendations.

MATERIALS AND METHODS

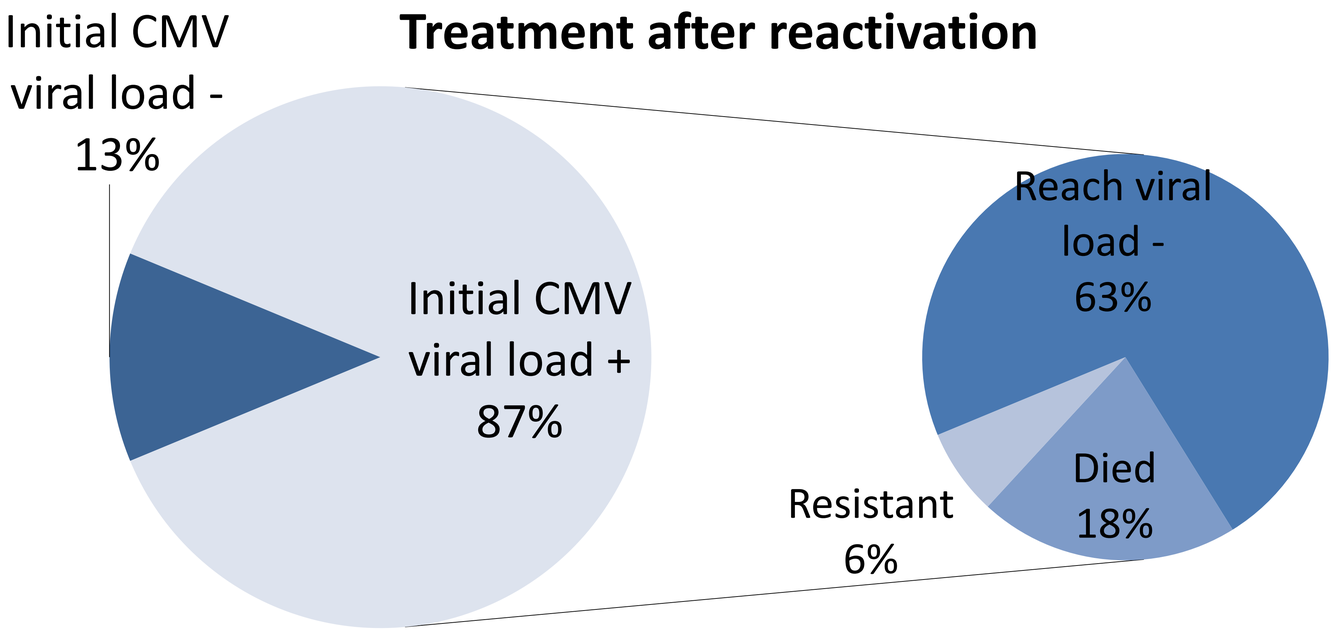
Observational, retrospective study in a terciary hospital; January 2013 – June 2015. Adults HSCT recipients treated with foscarnet for pre-emptive therapy or treatment of CMV. Results were compared with clinical trials, retrospective studies and clinical practise guidelines and experts recommendations.

RESULTS

43 episodes (34 patients, 50% women); median age 52 years (range 47-57).

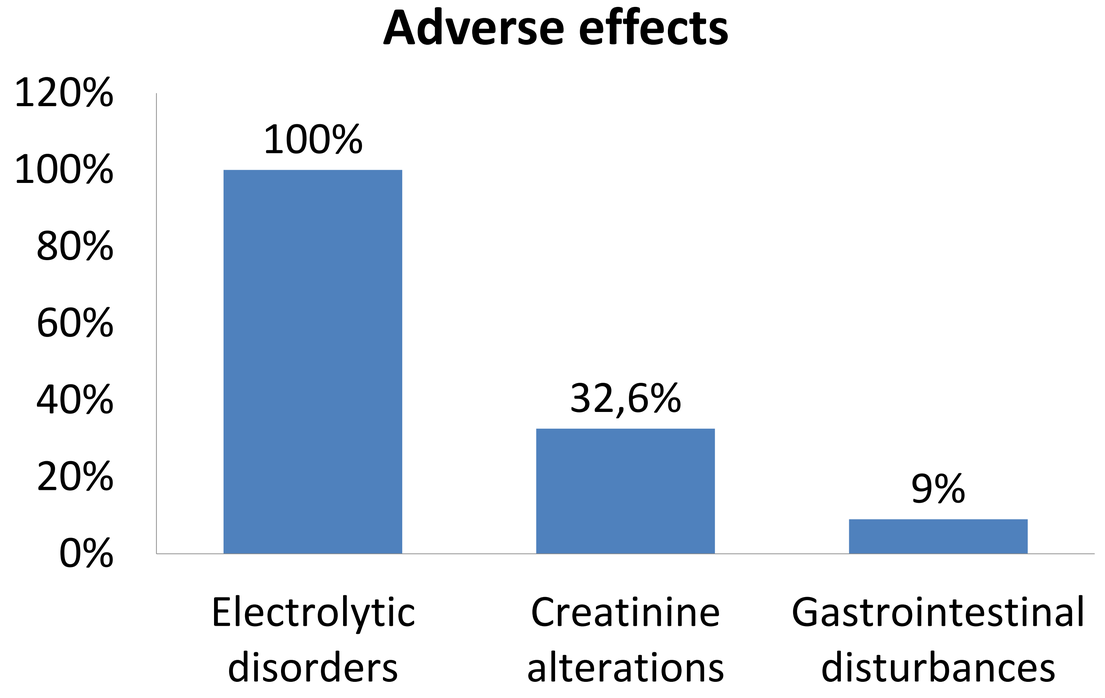
Effectiveness

9 cases (31%) pre-emptive therapy: none reactivation of CMV
34 cases of treatment after reactivation



Safety

100% had at least 1 adverse effect (3% discontinuations)
Concomitant drugs causing electrolyte alterations or renal toxicity not registered



CONCLUSIONS

Foscarnet has shown to be effective with an acceptable toxicity in CMV treatment in HSCT. Results are not entirely comparable with other published studies[1,2] due to the differences between populations and therapeutic regimens. The use of foscarnet in the hospital mainly follows experts recommendations and guidelines. More studies should be carried out.

REFERENCES

[1]Reusser P et al. Randomized multicenter trial of foscarnet versus ganciclovir for preemptive therapy of cytomegalovirus infection after allogeneic stem cell transplantation. Blood 2002 Feb 15;99(4):1159–64.

[2]Asakura M et al. Use of foscarnet for cytomegalovirus infection after allogeneic hematopoietic stem cell transplantation from a related donor. Int J Hematol. 2010 Sep;92(2):351–9.