

LETERMOVIR, GANCICLOVIR AND IMMUNOGLOBULINS COMBINATION TREATMENT IN AN IMMUNOCOMPROMISED PATIENT WITH CYTOMEGALOVIRUS INFECTION: A CASE REPORT

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Background and importance

Patients with severe **cytomegalovirus (CMV)** infection should be treated with antiviral agents until symptoms are resolved and plasma CMV load is controlled. Management of these patients is sometimes difficult due to resistance or ineffectiveness.

Aim and objectives

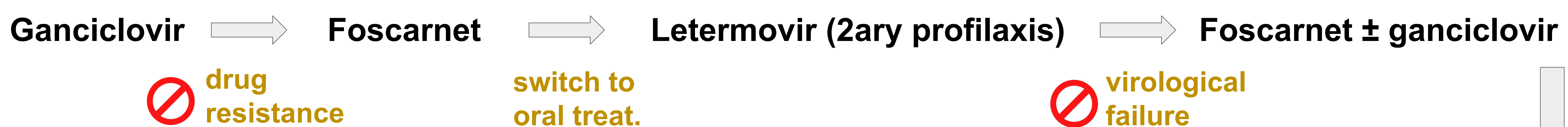
To describe the response to combined treatment with **letermovir, ganciclovir and anti-CMV immunoglobulins (Ig)** for CMV infection in an immunocompromised patient refractory to monotherapy.

Materials and methods



- 72-year-old man
- Good's syndrome (thymoma-associated immunodeficiency)
- **CMV infection**

Treatment sequence:



After a transient response, this latter treatment was insufficient to stop a rise in CMV plasma levels. To control CMV and facilitate intravenous to oral switch, **combined treatment with oral letermovir and IV ganciclovir was proposed, added to anti-CMV Ig that the patient was already receiving.** Effectiveness of this triple therapy was assessed by reduction of CMV plasma load.

Results

Despite an initial peak in CMV viral load, triple therapy exhibited a good virological response (CMV <1000 copies/ml) and tolerance.

Conclusions

This is the **first case of letermovir-ganciclovir-antiCMV Ig combined therapy in a patient with acquired immune deficiency.** Therefore, this therapy should be considered as a possible alternative for refractory CMV infection.

