

P. Granda¹, M. Sánchez De Castro¹, S. García¹, A. Yuste¹, P. Sánchez¹, S. Heinz¹, P. Prats¹, MH. Gonzalo¹, G. Ramirez². ¹Pharmacy. ² Infectious Diseases. Hospital Central de la Defensa Gómez Ulla. Madrid. Spain

BACKGROUND

Amphotericin B (AmB) is a standard treatment for opportunistic fungal pathogens. Intravenous lipid formulations of AmB (L-AmB) allow the administration of higher doses. To achieve higher concentration in cerebrospinal fluid (CSF), intrathecal administration of L-AmB has been successfully used. Appearance of different *Candida* species in CSF are infrequent but critical, therefore, there are still significant knowledge gaps in intrathecal L-AmB pharmacodynamics and pharmacokinetics.

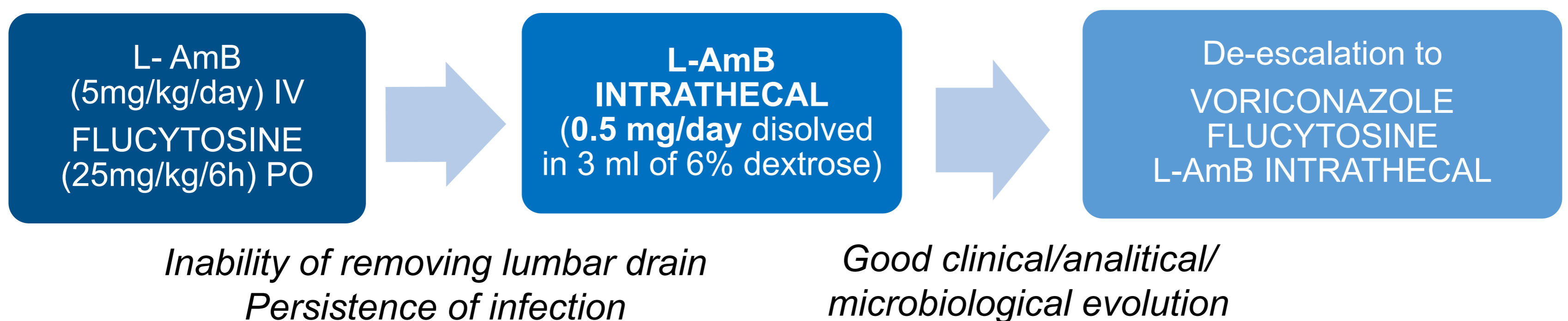
PURPOSE

To describe the use of intrathecal L-AmB in *Candida* meningitis in one patient.

MATERIAL AND METHODS

A 59-year-old woman with a history of obesity with metabolic syndrome was admitted to the Neurosurgery Service for bilateral cerebellar ischemic infarction needing decompressive craniectomy. During her evolution she presented as a complication CSF fistula requiring lumbar draining and subsequent urgent surgical intervention. CSF analysis revealed total cells 1400/mm³, leukocytes 1398/mm³, 6.38 mg/dL of glucose and 315 mg/dL of protein. *C. albicans* and *Nakaseomyces glabrata* (previously named *C. glabrata*) were isolated in removed adipose flap and CSF, respectively. Intravenous and intrathecal antifungal therapy was required and so, the Pharmacy Service was asked to develop a L-AmB intrathecal injection.

RESULTS



INTRATHECAL L-AmB discontinued 20th day of treatment, when:

- ✓ CSF cell count, glucose and protein were OK
- ✓ Last four CSF cultures kept sterile.

WELL TOLERATED
NO SIDE EFFECTS

CONCLUSION

Despite the limitations in the interpretation of this case report, the administration of intrathecal L-AmB may constitute a less toxic therapeutic alternative to conventional AmB (deoxycholate) for *Candida* meningitis.

