EFFECTIVENESS OF TOCILIZUMAB IN TAKAYASU ARTERITIS: A CASE REPORT

4CPS-140

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Background

→ Takayasu arteritis (TA) is a chronic inflammatory vasculitis of unknown origin affecting large vessels, predominantly the aorta and its main branches. Early symptoms include systemic inflammation and ischemia of involved organs.
→ Tocilizumab is a humanised monoclonal antibody inhibitor of IL-6 receptor that not have license for its use in TA.

Purpose

→ To assess the safety and efficacy of tocilizumab in a pluripathological patient with TA.

Material and methods

→ Observational retrospective study of the use of tocilizumab in a child diagnosed with TA and several pathologies for 1 year.
→ The information was obtained from the electronic clinical history (DIRAYA®) and the pharmacy service managing software (ATHOS-PRISMA®).

Results

→ A 12-year-old girl was admitted in our tertiary care center in July 2016 for heart failure secondary to dilated cardiomyopathy, diagnosed during admission of Takayasu Grade V disease (supraortic, thoracic and abdominal-renal OA). In addition she presents, as basic diseases, arterial hypertension and renal failure. Treatment with corticosteroid pulses at 30 mg/kg and subsequently cyclophosphamide as the first option was started. On the 4th day, coinciding with cyclophosphamide administration, the patient presents clinical deterioration and increased cardiac dysfunction related to hydration to cyclophosphamide administration solved after optimization diuretics.
→ Received a total of 4 cycles of cyclophosphamide. However, after checking that from last cycle maintains high acute-phase reactants, anemia, and elevated IL-6 levels, it was decided to switch to Tocilizumab to stop systemic inflammatory activity and avoid new obstructions.
→ Treatment with tocilizumab 8 mg/kg/biweekly was initiated prior processing by pharmacy and authorization by the medical director. Concomitant treatment: corticosteroids, antihypertensives and diuretics.
→ Ten months later, Takayasu disease is inactive and most clinical manifestations have disappeared (only she referred discrete and eventual pain in flexion of the left elbow without limitation or associated swelling). The patient continues with the same dosage.

Conclusions

→ In this case, tocilizumab has been effective and well tolerated for this patient with TA. Nevertheless, more studies are needed to demonstrate its efficacy and safety profile in this disease.