

SAFETY AND PERSISTENCE OF ANTIFIBROTIC DRUGS IN INTERSTITIAL LUNG DISEASES

Joy Carmona P, González Chávez J, Díaz Ruíz P, Suárez González M, Merino Alonso J
Hospital Universitario Nuestra Señora de Candelaria,
Santa Cruz de Tenerife. Spain.

BACKGROUND AND IMPORTANCE

Interstitial lung diseases (ILD) is a group of rare diseases with bad prognosis, being Idiopathic pulmonary fibrosis (IPF) the most frequent of them. They can be treated with antifibrotic drugs: **nintedanib** or **pirfenidone**.

However, these drugs have a high rate of adverse effects, which has a significant impact on treatment persistence.

AIM AND OBJECTIVES

To analyse the safety of pirfenidone and nintedanib in patients with ILD as well as treatment's persistence, in a third-level hospital.

MATERIAL AND METHODS

○ January 2016 – August 2022: **RETROSPECTIVE OBSERVATIONAL STUDY**

○ Patients with ILD treated with antifibrotic drugs

○ Analysed variables:

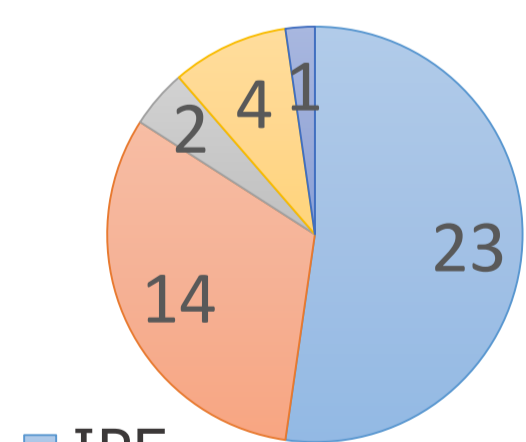
SEX	ASSOCIATED DRUG
AGE	DRUG SWITCH
DRUG	SIDE EFFECTS
DURATION	DISCONTINUATION

RESULTS

66 patients, 67% men, mean age 67 (47-86).

NINTEDANIB:

44 patients



- IPF
- Progressive pulmonary fibrosis (PPF)
- ILD associated with systemic sclerosis
- Fibroemphysema
- ILD not classified

- **5** Associated with mycophenolate mofetil
- **12** Dose reduction (gastrointestinal effects)
- **1** Temporary discontinuation (increased transaminases)
- **2** Treatment discontinuation (bleeding)



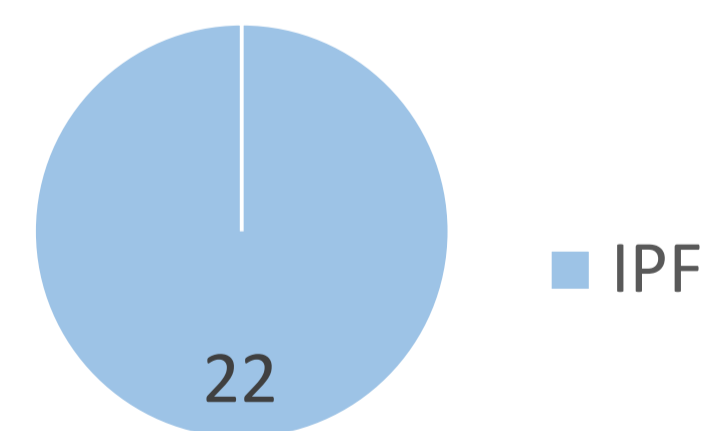
Switched to
pirfenidone

○ **Persistence:**

18 months nintedanib vs 24 months pirfenidone

PIRFENIDONE:

22 patients



- **2** Dose reduction (diarrhoea)
- **2** Treatment discontinuation (severe burns)



Switched to
nintedanib

CONCLUSIONS AND RELEVANCE

Thanks to a close follow-up in patients with ILD, it is possible to modify the dose and to achieve greater tolerance to treatments. The pandemic affected negatively during the year 2020, not only because of the impossibility of receiving medical appointments, but also due to the acceleration of their death.

The rapid establishment of antifibrotic treatment and the adequate control of adverse effects are the key for this type of patients.