OFF-LABEL USE OF CIDOFOVIR INTRALESIONAL INJECTIONS IN EXTENSIVE ANOGENITAL CONDYLOMATOSIS: A CASE REPORT

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Background and importance

Genital warts caused by human papillomavirus (HPV) in condylomatosis often show a variable response to recommended therapies, especially in immunocompromised patients. New alternatives to improve their approach are needed.

Aim and objectives

To describe the effectiveness, safety, and preparation of cidofovir intralesional injections (ILI) for the treatment of HPV condylomatosis in an immunocompromised patient.

Materials and methods



- 33-year-old woman
- Renal transplanted and with a late-detected common variable immunodeficiency.
- Giant perianal condylomata accuminata (previously treated with liquid nitrogen, podophyllotoxin, imiquimod, sinecatechins and 5-fluorouracil, with no response)

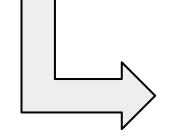
Off label treatment with monthly cidofovir ILIs was proposed and approved. Response to cidofovir ILIs was assessed by reduction in both the number and size of anogenital warts.

Results

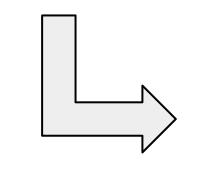
Preparation of cidofovir ILIs:



Cidofovir 375 mg/5 ml (commercial presentation)



Dilution in 60 ml of 0.9% sodium chloride (final concentration of 6.25 mg/ml)



5 syringes of 12 ml (75 mg of cidofovir in each one) Stability of 5 months refrigerated (2-8°C)

After three monthly drug administrations, a significant improvement in lesions was described by a reduction in both their volume and extension. The patient presented good tolerance to injections, only requiring local anesthesia with lidocaine for pain.

Conclusions

This is the first case of use of this formulation of cidofovir ILIs in a patient with anogenital condylomatosis and immune deficiency. The formulation was also stable and well-tolerated. Therefore, this therapy may be considered a reasonable option for the treatment of HVP condylomatosis when other treatments seem ineffective.

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