

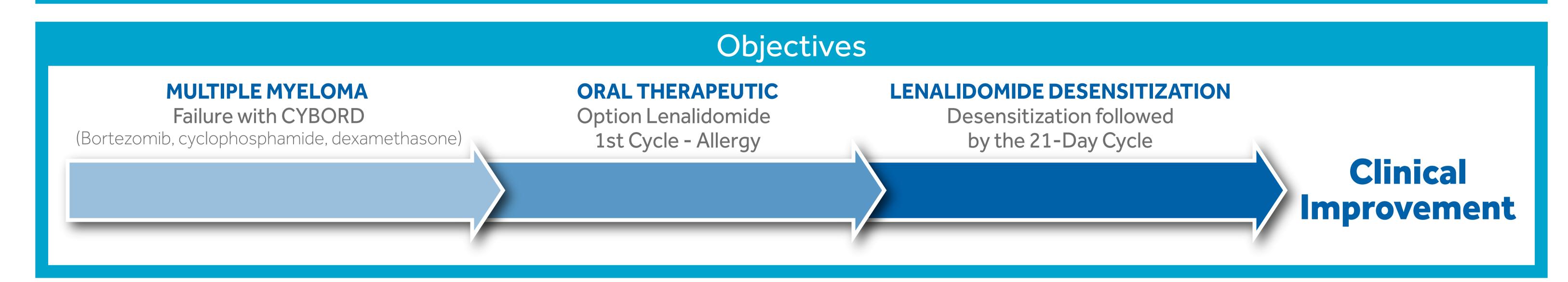


# **Successful desensitisation** in a patient with lenalidomide hypersensitivity

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# Introduction

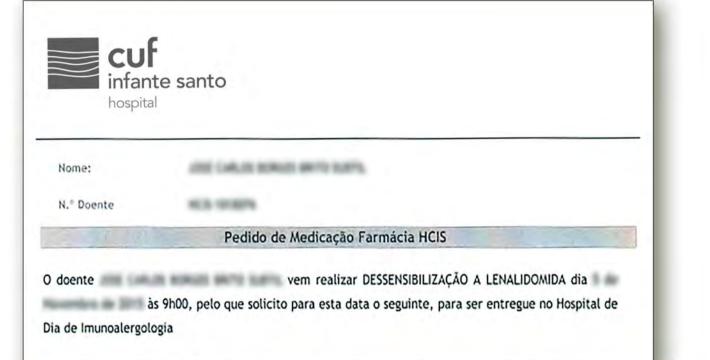
Male patient diagnosed with multiple myeloma IgG lambda stage III-A / ISS III, bone disease and G2 neuropathy related to CYBORD chemotherapy. Treated with Lenalidomide 25 mg in combination with dexamethasone, presented macular erythema, periocular edema, pruritus and fever, indicative of hypersensitivity to the drug. In order for this hypersensitivity reaction not to limit / prevent the continuation of the treatment most appropriate to the clinical situation, a desensitization to the drug is proposed by the oncologist in cooperation with the immunology team. The desensitization protocol was established in consonance with the pharmaceutical services. [1]; [2]

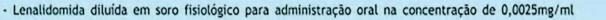


Methods

#### Image 1 **Desensitization Protocol**

### Image 2 Lenalidomide solutions for the desensitization protocol













# Results

# Scheme 1 Pharmacotherapeutic follow-up

# Table 1 Recording of the first desensitization procedure

	Do you feel tired?		Do you have an appetite?	
Did you have a secondary skin reaction?		Sleep tight?		Thrombophlebitis follow-up

Time	Hours	Time to next administration time (Minutes)	Dilution	Volume (mL)	Dose (mG)	Cumulative dose	Reaction
0	13h35	60	0.0025mg/ml	0.1	0.00025	0.00025	
1h00	14h35	35	0.0025mg/ml	0.5	0.00125	0.0015	
1h35	15h10	20	0.025mg/ml	0.1	0.0025	0.004	
1h55	15h30	20	0.025mg/ml	0.5	0.0125	0.0165	
2h15	15h50	15	0.025mg/ml	1	0.025	0.0415	
2h30	16h05	15	0.025mg/ml	3	0.075	0.1165	
2h45	16h20	15	0.025mg/ml	5	0.125	0.2415	
3h00	16h35	15	1mg/ml	0.25	0.25	0.4915	
3h15	16h50	15	1mg/ml	0.5	0.5	0.9915	
3h30	17h05	15	1mg/ml	0.75	0.75	17 415	
3h45	17h20	15	1mg/ml	1	1	27 415	
4h00	17h35	15	1mg/ml	2.5	2.5	52 415	Erythema of the face (No pruritus or angioedema)
4h15	17h50	15	1mg/ml	5	5	102 415	Keeps face erythema
4h30	18h05	-	1mg/ml	15	15	252 415	Erythema of the face, but more tenuous than previously remains asymptomatic

- **n** Favorable clinical evolution, with positive clinical and laboratory response;
- n Stabilization of disease;
- **n** Decreased analgesic use by stabilizing the stage of the disease.

# Conclusion

- Advantage of the protocols of induction of temporary tolerance in cancer patients, allowing the continuation of the treatments with a lower possible risk of adverse reaction / hypersensitivity;
- Absence of disease progression after one year of the implementation of the desensitization protocol;
- Importance of a multidisciplinary team to establish a desensitisation protocol for Lenalidomide;
- First protocol carried out in Portugal.

#### REFERENCES

[1] Phillips, J.; Kujawa, J.: Davis – Lorton, M.; et al; Successful desensitization in a patient with Lenalidomide Hypersensitivity; American Journal of Hematology; 2007; pg 1030; [2] Resumo das Caracteristicas do Medicamento, Lenalidomida, (http://www.ema.europa.eu/docs/pt\_PT/document\_library/EPAR\_-\_Product\_Information/human/000717/WC500056018.pdf), 2016;

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