



EFFICACY OF ORAL THALIDOMIDE IN PATIENTS WITH RECURRENT GASTROINTESTINAL BLEEDING (DGI-031)

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BACKGROUND

Recurrent gastrointestinal bleeding caused by angiodysplasia, and non-responding to standard treatment, currently lack effective medical treatment

PURPOSE

To evaluate the efficacy of oral thalidomide in patients with gastrointestinal bleeding from angiodysplasia refractory to other treatments.

MATERIALS AND METHODS

Retrospective study for a year including all patients with recurrent gastrointestinal bleeding treated with oral thalidomide manufactured in the pharmacotechnic unit from a third level hospital. The information was obtained from the outpatient dispensing program, Farmatools, Paracelso pharmacotechnics program, and by reviewing medical records from the hospital database, Archinet. It was extracted from each patient diagnosis, treatments used for gastrointestinal bleeding, line and duration of treatment with thalidomide and reduced transfusion requirements after treatment.

RESULTS

In the study period were identified 3 patients for whom the Digestive Service ordered thalidomide capsules 100mg. The patients did not respond to standard treatments such as argon gas sessions and octeotide. They were introduced thalidomide 100mg daily for 4 months. One of them discontinued treatment for intolerance and the other 2 finished them. There was a decrease in the number of transfusions after treatment with thalidomide in the 3 cases.

CONCLUSIONS

Thalidomide appears to be a therapeutic alternative to consider when treating gastrointestinal bleeding caused by angiodysplasia in cases where there is no response to conventional treatments. One impediment to this treatment option to consider is that it causes intolerance in some patients, leading to treatment discontinuation. Thalidomide is less aggressive than other drugs used and appears to decrease transfusion requirements of patients.