Safety of expanded therapeutic range of valproic acid

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PHC029

BACKGROUND:

✓ Therapeutic drug monitoring (TDM) of total valproic acid (TVPA) concentrations is challenging for its variable pharmacokinetics.

✓ In our service the TVPA is normalized according to serum albumin (NTVPA).

✓The accepted serum concentration range is 50-150 mg/L. Higher concentrations could be useful in complicated seizures such as status epilepticus (SE).

✓The aim of this study was to evaluate the security of high NTVPA levels.

MATERIAL AND METHODS:

✓ Retrospective observational study in patients treated with VPA included in TDM program with a minimum of two NTVPA levels over 150 mg/L separated by at least 7 days.

✓NTVPA was calculated from TVPA according to serum albumin*:

NTVPA = (TVPA x unbound fraction)/6,5

- ✓ Parameters recorded:
 - Demographics: age, sex, admission service.
 - Pharmacological treatment: VPA indication, dosage, concomitant antiepileptic therapy, serum concentration of TVPA, serum albumin, pharmacological sedation.
 - Efficacy variables: seizures, electroencephalogram (EEG).
 - Laboratory data: platelet count, liver enzymes (ALT)
 - Adverse effects.

RESULTS:

- Demographics
- 24 patients were included (13 men), followed for a mean of 32 days [7-156].
- Mean age was 62 years [29-86].
- 16 (67 %) patients were admitted to intensive care units.

Pharmacological treatment

- 140 TVPA analyses (6 analyses/patient [2-13]).
- 14 (58 %) were treated for status epilepticus.
- The results of the TVPA and NTVPA, albumin serum concentrations are shown in Table 1 and Graph 1.

Table 1. Descriptive parameters: serum levels of albumin, TVPA and NTVPA

	Median	Мах	Min	P25	P75
Albumin (g/L)	25	38	18	22	27
TVPA (mg/L)	64	140	32	53	77
NTVPA (mg/L)	203	377	151	174	245

- Most of the patients (n=17) received a combined therapy with one or more of the following antiepileptic drugs: phenytoin, levetiracetam, oxcarbazepine, carbamazepine, clonazepam, phenobarbital and lacosamide.
- > Efficacy variables



≻Side effects

diarrhea (n=1)

 sedation (n=2); however, 15 patients were pharmacologically sedated.

Laboratory monitoring

116 data of ALT and 119 of platelet count have been analized.

 5 patients had ALT levels over two-fold the normal range (> 1,4 ukat/L) at baseline. At the end of the treatment, all of them had values < 1,4 ukat/L.

Graph 1. Distribution of TVPA and NTVPA

 2 patients had clinical seizures despite high levels of NTVPA, both confirmed by EEG. •22 patients had a normal platelet count, and 2 had a platelet count < 135 x10E9/L but stabilize during the treatment.</p>

CONCLUSIONS:

- 1. Expanded therapeutic range NTVPA levels may be a save option to treat complicated seizures such as status epilepticus
- 2. According to our results, we could propose 245 mg/L as an upper level of therapeutic range of NTVPA with a close monitoring of platelet count and liver enzymes.

Bibliography:

* Hermida J, Tutor JC. A theoretical method for normalizing total serum valproic acid concentration in hypoalbuminemic patients. J Pharmacol Sci 2005; 97:489-93









