SAFETY AND TOLERABILITY OF VORICONAZOLE TREATMENT: A RETROSPECTVE OBSERVATIONAL STUDY

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BACKGROUND AND IMPORTANCE

Voriconazole is an antifungal agent with concentration-dependent activity and high individual variability. It is generally well tolerated. However, adverse effects (AEs) may occur, requiring dose reduction (DR) or discontinuation of treatment.

AIM AND OBJECTIVES

To describe the safety and tolerability of voriconazole treatment in a cohort of patients admitted to a tertiary hospital.

MATERIAL AND METHODS

Retrospective observational cohort study patients treated with voriconazole during 2022

Variables collected

- Age
- Sex
- Diagnosis
- Route of administration
- Treatment start date
- Date and type of AES
- Post-AE measures
- Therapeutic drug monitoring(TDM)

Voriconazole AES: concentration dependent or non-concentration dependent

RESULTS

135 patients were treated with voriconazole

= Men 61%

Mean age = 64 [4-91] years

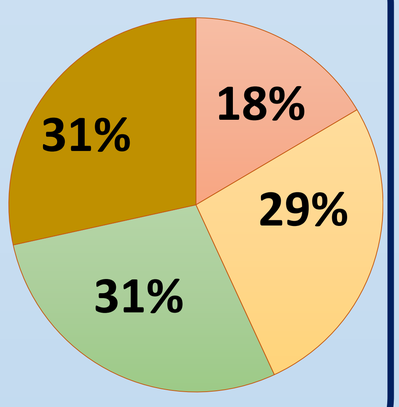
Most patients were immunocompromised (42%)

Treatment was empiric in 21%, prophylaxis in 10% and targeted therapy in 69%. The main diagnosis was *Aspergillus* (81%), 11% *Candida* and 8% other infections. It was administered intravenously in 45%, orally in 30%, and 25% were switched from intravenous to oral. The median duration of treatment was 9 days.

Voriconazole-related AEs occurred in 38 patients (28%). The median time to AE onset was 5 days.

Concentration-related AES

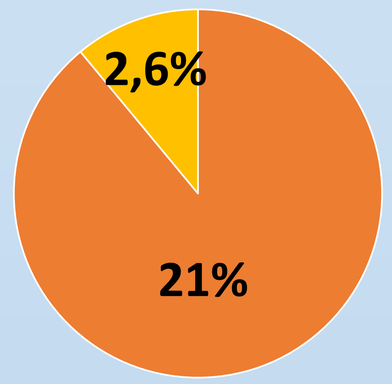
- Hepatotoxity (7 patients)
- Visual disturbances (11 patients)
- Psychiatric disorders (12 patients):
  - -Hallucinations:10
  - -Confusional syndrome:2
- Neurologic disturbances (12 patients)
  - -Somnolence: 4
  - -Disorientation: 3
  - -Vivid dreams:4
  - -Tremor: 3



Four patients required DR and 10 discontinued treatment.

Non-concentration-related AES

- Dermatologic reactions (8 patients):
  - -Photosensitivity: 3
  - -Alopecia: 2
  - -Erithema:4
  - -Warm sensation: 4
- Digestive disorders:
  - -Diarrhoea:1



Two patients discontinued treatment.

Of 38 patients with AEs, 22 (58%) had voriconazole TDM: 17 had therapeutic concentrations, 2 infratherapeutic and 3 supratherapeutic, of whom 2 tolerated treatment with DR and one discontinued voriconazole for other reasons.

CONCLUSIONS AND RELEVANCE

Approximately 1 in 3 patients experienced AEs. The most common AEs were visual disturbances and hallucinations.
We cannot confirm that these AEs were due to supratherapeutic concentrations as 45% had concentrations in the therapeutic range but TDM may be an interesting strategy to improve tolerability to voriconazole.

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