

Cremades Artacho C¹, Carcelero San Martin E¹, Carro Méndez I¹, Rial Domínguez Y¹, Monge Escartín I¹, Riu Viladoms G¹, Arance Fernández A², Soy Muner D¹.

¹Pharmacy Service. Division of Medicines. Hospital Clínic Barcelona, Spain

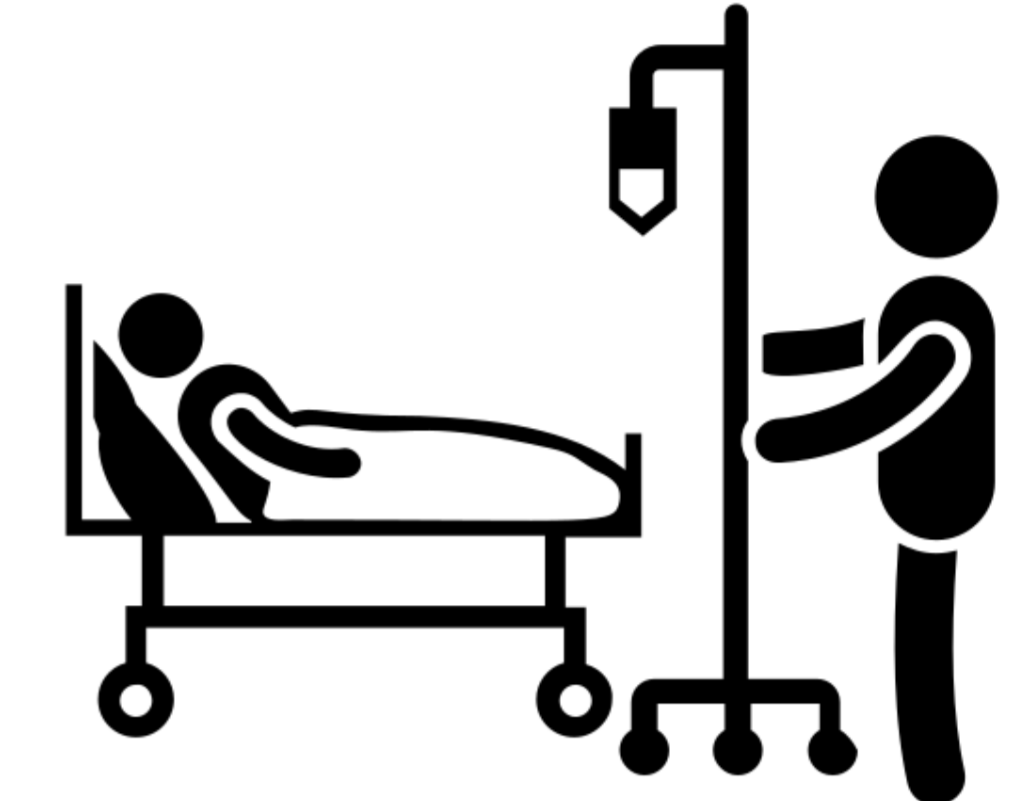
²Medical Oncological Service. Hospital Clínic Barcelona, Spain

Background and Importance

Aim and Objectives

- Immune checkpoint inhibitors (ICIs) have transformed cancer treatment. However, their use can lead to immune-related adverse events (irAEs).
- Corticosteroids are the first-line treatment; in refractory cases, infliximab can be administered.

- ▶ To evaluate the efficacy of infliximab in treating irAEs in cancer patients receiving ICIs.

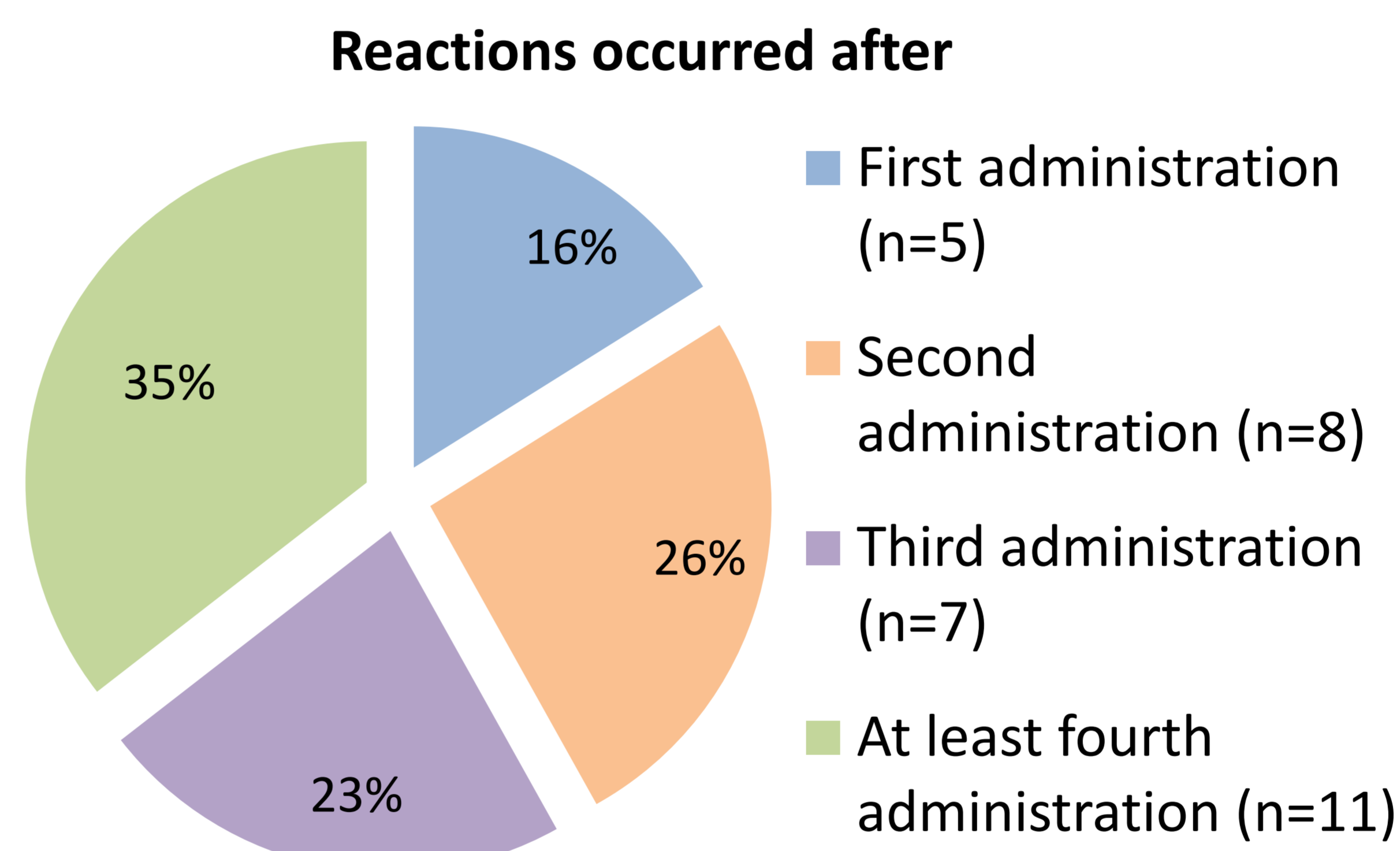
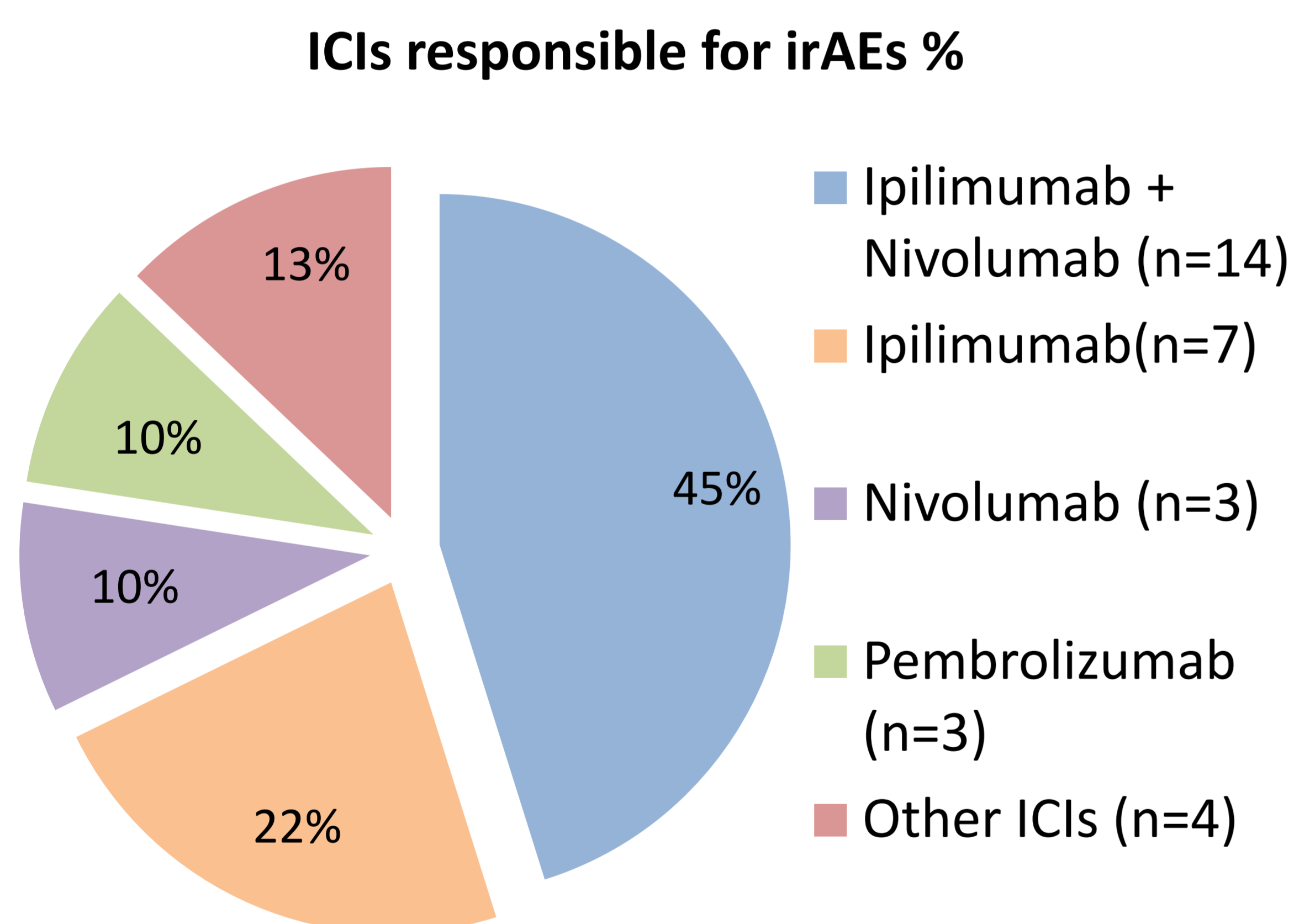


Materials and Methods

- A retrospective observational study was conducted at a tertiary care teaching hospital, including demographic, clinical, and efficacy data of patients treated with infliximab for irAEs from January 2011 to October 2024.

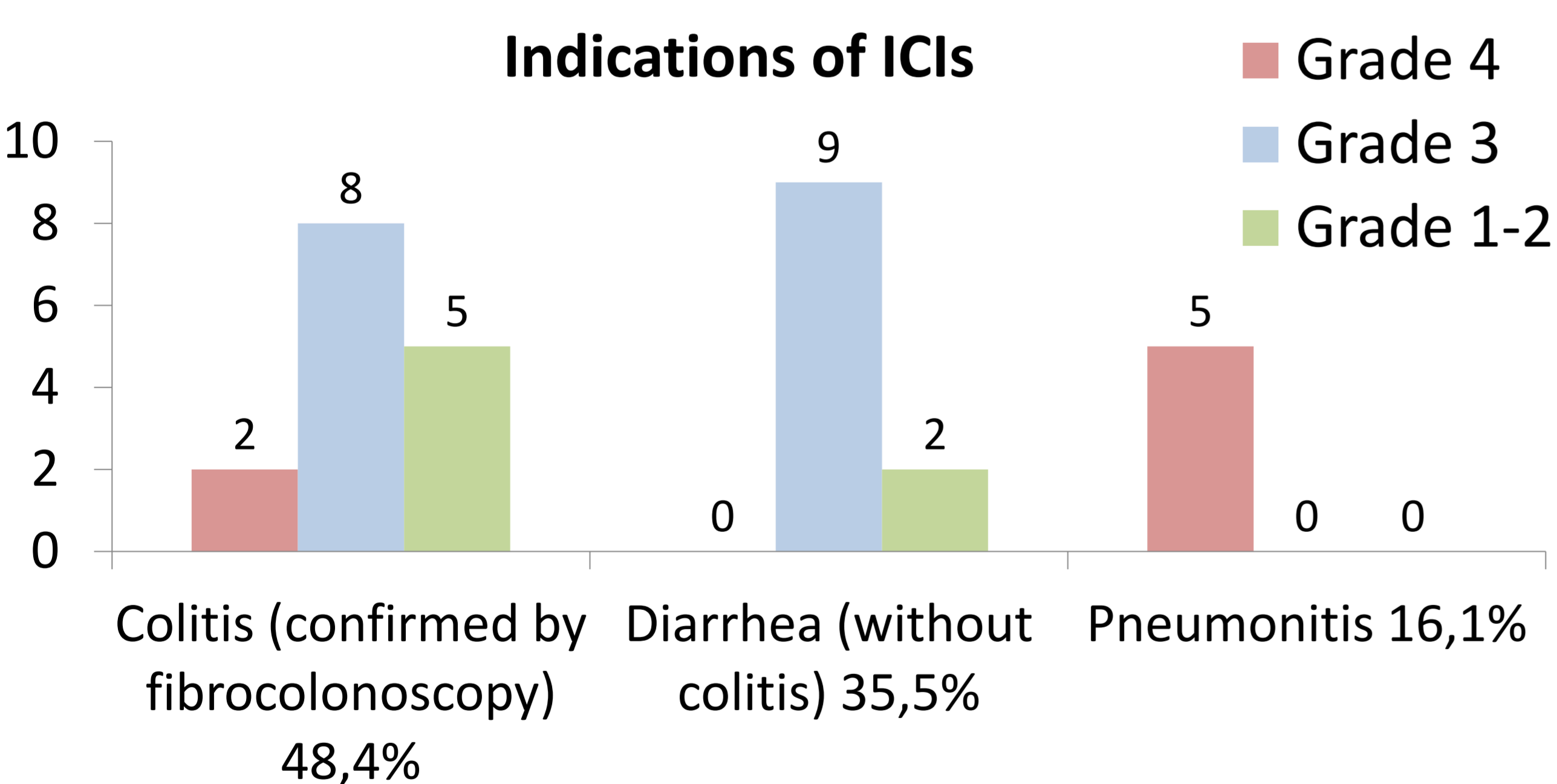
Results

31 patients were included; 58.1% were men, with a median age of 61 years (range: 28-84).



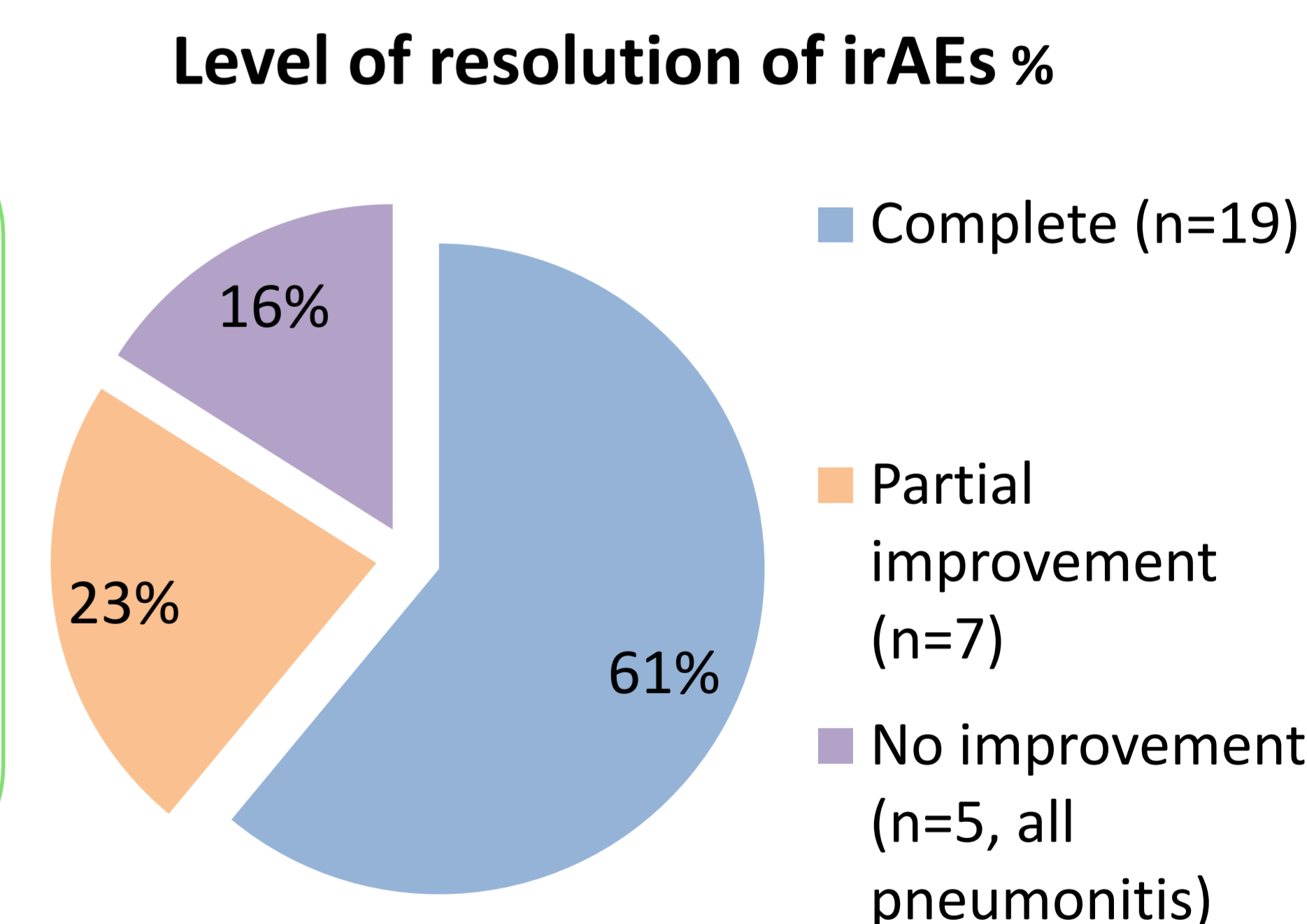
During ICI treatment, 32.3% of patients experienced more than one irAE.

All patients received steroids (1mg/kg/d) as first-line therapy, with an initial response in 54.8% (n=17) and a median treatment duration of 11 days.



The number of infliximab doses (5mg/kg, 2 patients receiving 10mg/kg) administered was:

- One dose: 22 patients (71%).
- Two doses: 7 patients (22.6%).
- Three doses: 2 patients (6.5%).



58.1% of patients received Infliximab during hospitalization and 41.9% in oncology day hospital Only 29.1% resumed immunotherapy after infliximab treatment, with one patient experiencing recurrence of the irAE.

Conclusion and Relevance

- Infliximab was effective in treating immune-mediated colitis and diarrhea, reducing steroid dosages. However, it was no beneficial in cases of immune-mediated pneumonitis. Less severely ill patients can receive infliximab safely in oncology day hospital.

