DEVELOPMENT OF HYPOMAGNESEMIA IN CRITICAL PATIENTS TREATED WITH ISAVUCONAZOLE

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Aim and Objectives
To observe the occurrence of hypomagnesemia in a cohort of patients treated with isavuconazole.

Background and Importance
Isavuconazole is an antifungal drug indicated in invasive aspergillosis and mucormycosis in patients for whom amphotericin B is not appropriate. A rare adverse effect of this drug is hypomagnesemia, which can trigger other electrolyte disturbances such as hypocalcemia or hypokalemia.

Materials and Methods
Descriptive, observational, retrospective study

Primary endpoint

Variables collected
- Sex
- Age
- [Mg2+] plasmatic before
- [Mg2+] plasmatic after
- Treatment duration
- Intravenous Mg rescue
- Use of proton pump inhibitors

Results
37 patients included
Median age: 63 years (Min-max; 24-62)
68% were men
Mean treatment duration: 6±4 days

Magnesium was measured in 18 patients (49%)
- 12 patients treated with pump inhibitors
- [Mg2+] plasmatic before: 0.88±0.18 mmol/L
- [Mg2+] plasmatic after: ±0.14 mmol/L

Hypomagnesemia was detected in 6 (17%) patients

Conclusion
Since hypomagnesemia is a known adverse reaction to the administration of this antifungal drug, and that it can cause other electrolyte alterations, it may be advisable to monitor plasma magnesium levels more closely during the duration of treatment.