

"REAL LIFE" EFFECTIVENESS AND SAFETY ASSESSMENT OF FOSCARNET

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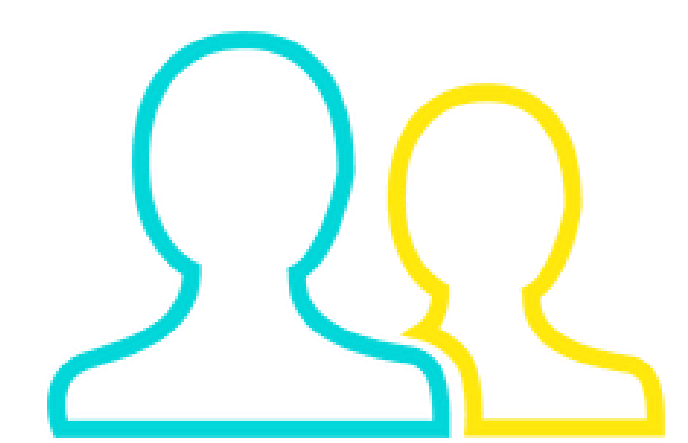
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Background and importance: Cytomegalovirus (CMV) infection is an important cause of mortality especially in hematological patients. Foscarnet has been used to treat ganciclovir-resistant CMV infections.

Aim and Objectives: To evaluate the **effectiveness and safety** of Foscarnet in the treatment of CMV infection in a third level hospital.

Materials and Methods:

- Retrospective observational study. Patients who received Foscarnet from January 2018 to April 2020
- Variables: age, sex, pathology, time of treatment, pattern, basal (Foscarnet beginning) and final (when Foscarnet was suspended) viral load (VL), basal and nadir glomerular filtrate (GF), metabolic toxicity (basal and nadir serum electrolytes).



Results:

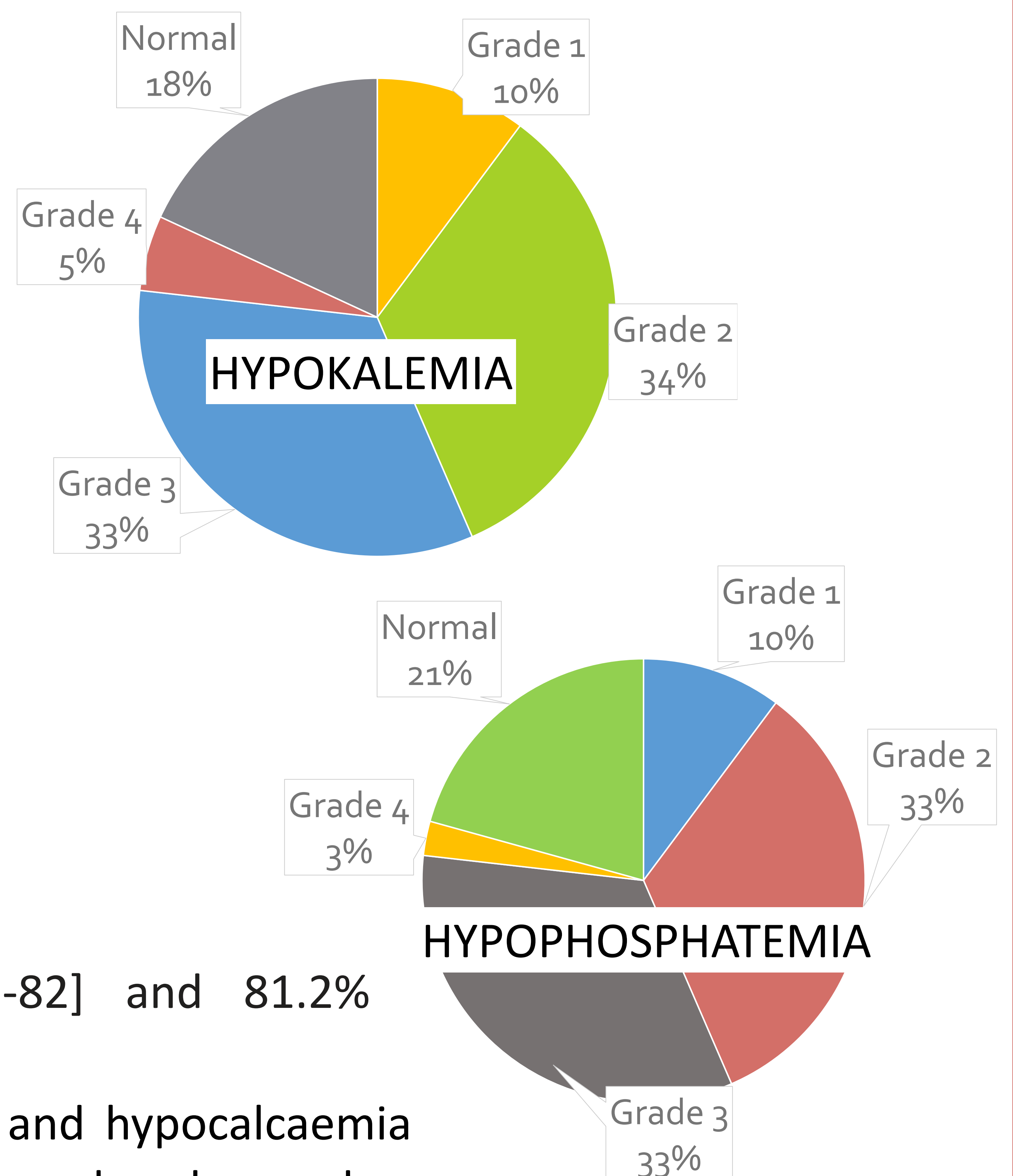
39 PATIENTS, 22 MEN. MEAN AGE 55,8 ± 14,9 YEARS [26-82]

Mean time	11 ± 6,6 days [1-27]
Dosage pattern	90mg/kg/12 hours in 69,2%
Median basal VL	1.135 UI/ml [3,34-65400]
Final VL	Undetectable in 46,1%
Mean reduction in VL	90,4 ± 17,9 % [18-100]
Reduction in GF	In 64.1% of patients
Mean reduction GF	25,6 ± 21,2 %
Deceased*	41,0%

*Their average age was 61±14.4 [27-82] and 81.2% presented hematological pathologies.

**Hypomagnesaemia (grade 1 in 12.8%) and hypocalcaemia (grade 2 in 28.2% and grade 3 in 33.3%) were also observed.

Metabolic toxicity, CTCAE (version 4.0):**



Conclusion and relevance: Despite the high mortality observed, Foscarnet has effectively reduced viraemia due to CMV infection, with high rate of viral negativization. Further studies are needed to extend the toxicity data and improve the quality of care.