Abstracts

IMMUNOTHERAPY IN METASTATIC MELANOMA: A MIRACLE OR POISON

Background and importance Very significant therapeutic advances have been made with regard to immunotherapy in the treatment of metastatic melanoma. The use of monoclonal antibodies, particularly pembrolizumab, has shown encouraging results in terms of efficacy and survival in cancer patients, but some patients develop adverse reactions that can sometimes be fatal, or their management may require temporary or permanent interruption of treatment.

Aim and objectives We report the case of a patient who had immunological adverse reactions to pembrolizumab for metastatic melanoma.

Material and methods A 59-year-old patient was managed for lower limb melanoma in advanced locoregional evolutionary pursuit classified as T3b N3 M0. The absence of a BRAF mutation led to the introduction of immunotherapy with the anti-PD1 antigen pembrolizumab. Two weeks after the second injection, an initial and transient increase in tumour size with the appearance of new small lesions was noticed, associated with intense fatigue, taste alteration with loss of appetite and constipation. After the third injection, a false progression of the tumour was noticed, requiring discontinuation of treatment. The patient was hospitalised for undernutrition with sudden weight loss, asthenia and general deterioration. Biological examinations revealed anaemia with severe undernutrition. Fatigue and altered condition did not allow the patient to undergo scheduled chemotherapy. The patient died within 3 months. The accountability study was carried out in accordance with the French method.

Results In this case, pembrolizumab was implicated with an imputability score of I5 B4, according to the French method.

Conclusion and relevance New immunotherapy approaches are characterised by a range of new toxicities that must be known, not only by medical oncologists and by all those involved in the management of oncology patients. Early detection of immunological toxicities and early application of available algorithms allow for complete resolution of symptoms in the majority of cases. However, if these symptoms are neglected, the development can lead to serious toxicities, including death of the patient.

REFERENCES AND/OR ACKNOWLEDGEMENTS
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5PSQ-080

ASSESSMENT OF DOSE PREPARATION PRACTICES FROM LIQUID ORAL FORMS BY MOTHERS OF CHILDREN HOSPITALISED IN OUR PAEDIATRIC DEPARTMENT

Background and importance In our paediatric department, we welcome low income populations, it is the mothers who take care of the administration of oral treatments to their children. Because of the high rate of illiteracy among these mothers, this situation can lead to administration errors, particularly when it comes to oral presentations with a liquid administration device.

Aim and objectives To study the dose preparation errors of liquid oral forms by the mothers of hospitalised children in our paediatric department.

Material and methods This prospective observational study was conducted in our paediatric department, between March and June 2019. During this period, interviews including a questionnaire in dialectal Arabic on how to use the liquid oral forms they administer to their children (administration schedule, preservation and interchangeability of graduated pipettes) were conducted. Subsequently, the preparation of drug intake of the two most prescribed liquid oral
Background and importance Venous congestion in transplanted or re-implanted tissues remains a common and challenging complication in reconstructive surgery. Medicinal leeches have been increasingly used for salvage of compromised pedicle flaps and microvascular free tissue transfers. However, leech therapy is associated with a number of risks, including significant blood loss requiring transfusion and infections, as leeches can be vectors of bacteria, harboring antibiotic resistance, and can result in extensive soft tissue infection.

Aim and objectives The aim of this study was to assess the benefits–risks of leech therapy in one hospital: a retrospective study.

Material and methods The purchase, maintenance, and distribution of leeches in our hospital is centralized in the pharmacy from which the data on the numbers of leeches delivered to the clinical units, names of the patients and the number of leeches used per patient were obtained. We also performed a prospective survey to assess the conditions of maintenance and delivery of the leeches in the pharmacy and in the clinical units that used the most leeches.

Results Over 8 years, 42 patients were treated with an average of 34 leeches (5–126) over 2.5 days (1–12). The mean age of the patients was 48 years (34–93). There was a slight male predominance. Leeches were most commonly used by the plastic and reconstructive surgery unit. The success rate of leech therapy was 71.4%. However, 57% of patients developed anaemia, and 16.7% revealed A. hydrophila infections. All isolates were ticarcillin resistant, three were also fluoroquinolone resistant with one involving an extended spectrum β-lactamase producing one.

Conclusion and relevance In the era of increasing antibiotic resistance and before use of medicinal leeches, prior screening of resistance by a local pharmaceutical team seems logical and necessary.

REFERENCES AND/OR ACKNOWLEDGEMENTS

No conflict of interest.