中文題目:Bortezomib 引起之血管滲漏症候群:案例報告

英文題目: Recurrent capillary leak syndrome following bortezomib

therapy in a patient with relapsed myeloma

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ABSTRACT

Background: Bortezomib is a first in-class reversible proteasome inhibitor indicated

for the treatment of multiple myeloma (MM) patients. The efficacy of bortezomib in

newly-diagnosed and relapsed MM has been clearly demonstrated. The major adverse

effects of bortezomib include peripheral neuropathy, thrombocytopenia and

gastrointestinal complications. Here, we report a case of relapsed MM complicated

with capillary leak syndrome (CLS) after bortezomib treatment.

Case summery: A 65-year-old female patient with relapsed myeloma developed fluid

retention, ascites, and general anasarca after bortezomib administration. Aggressive

albumin infusion and loop diuretics did not take effects and she had to receive two

sessions of hemodialysis for pulmonary edema. CLS recurred after the second cycle

of bortezomib treatment. Dexamethasone was given alone with bortezomib in the

third cycle and subsequent CLS was prevented.

Discussion: CLS is a systemic process associated hyperpermeability of the body's

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microcirculation, resulting in extravasation of plasma proteins and fluid from the capillaries into extravascular space. Clinical manifestations include weight gain, pre-renal azotemia, peripheral and pulmonary edema, and third space fluid accumulation. CLS has been well documented to relate to certain drugs, such as retinoids, docetaxel, gemcitabine, sirolimus, and interleukin-2. However, there has been no report of bortezomib-related CLS to our knowledge.

CONCLUSIONS: Our report demonstrates CLS as an unusual side effect of bortezomib and dexamethasone combination therapy may diminish this phenomenon.