Cobicistat/darunavir/cobicistat/darunavir/emtricitabine/tenofovir-alafenamide/darunavir/ritonavir

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Various toxicities and off-label use: 9 case reports

In a retrospective single-center observational study of 55 patients conducted between 15 March 2020 and 15 May 2020, 9 patients [7 men and 2 women] aged 39–76 years were described, who developed cutaneous rash, thrombocytosis, tonic-clonic seizures, QT-prolongation, diarrhoea or asthenia following treatment with cobicistat/darunavir/emtricitabine/tenofovir-alafenamide for HIV infection or following off-label use of cobicistat/darunavir or darunavir/ritonavir for severe acute respiratory syndrome coronavirus 2 (SARS-CoV-2) infection.

Out of 9 patients, eight patients had SARS-CoV2 infection and one patient had HIV infection. The patients, who had SARS-CoV2 infection, received off-label treatment with oral cobicistat/darunavir 150/800 mg/day (4 patients) and oral darunavir/ritonavir 800/100 mg/day (4 patients). The patient, who had HIV infection, received treatment with oral cobicistat/darunavir/emtricitabine/tenofovir-alafenamide [Symtuza] 150/800/200/10mg/day. Subsequently, the patients developed cutaneous rash and thrombocytosis (1 patient), tonic-clonic seizures (1 patient), QT-prolongation (2 patients), diarrhoea (4 patients) and asthenia (1 patient) [*durations of treatments to reactions onsets and outcomes not stated*].

Cojutti PG, et al. Comparative Population Pharmacokinetics of Darunavir in SARS-CoV-2 Patients vs. HIV Patients: The Role of Interleukin-6. Clinical Pharmacokinetics 59: 1251-1260, No. 10, 2020. Available from: URL: http://doi.org/10.1007/s40262-020-00933-8

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