

Paracetamol

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No therapeutic response: case report.

A 69-year-old man exhibited no therapeutic response to paracetamol, while being treated for low-grade fever.

The man with non-squamous stage IV anaplastic lymphoma kinase (ALK)-positive non-small-cell lung cancer (NSCLC), had been receiving treatment with alectinib. On 15 March 2020, he was admitted in emergency due to hacking cough, worsening dyspnoea and low grade fever unresponsive to treatment with paracetamol [acetaminophen; *dosage and route not stated*] and respiratory failure. He had achieved partial response to alectinib started since November 2018. During admission, based on various clinical presentation and laboratory findings, he was diagnosed with Coronavirus disease 2019 (COVID-19). On 16 March 2020, the treatment with alectinib was discontinued, and he started receiving off label treatment with hydroxychloroquine and lopinavir/ritonavir for COVID-19. Additionally, he was receiving treatment with enoxaparin sodium [enoxaparin] concomitantly. After 3 days, on 19 March 2020, lopinavir/ritonavir was stopped. For subsequent 4 days, non-invasive ventilation (NIV) was continued following venture mask with progressive improvement in respiratory symptoms. Enoxaparin sodium and hydroxychloroquine were continued during admission. Gradually, his respiratory function improved. On 09 April 2020, with oxygen saturation of 99%, he was discharged. Hydroxychloroquine was stopped and no other therapy was prescribed at home. Before the discharge, he was positive for COVID-19. A few days after discharge, he was tested negative for COVID-19. On the day after discharge, alectinib was started with half dose for first 3 days and then with full dose. He had no significant adverse event. On 18 June 2020, complete resolution of the lung infiltrates was noted.

Montrone M, et al. Favourable outcome of coronavirus disease 2019 in a patient with anaplastic lymphoma kinase-positive non-small-cell lung cancer receiving alectinib. *European Journal of Cancer* 138: 109-112, Oct 2020. Available from: URL: <http://doi.org/10.1016/j.ejca.2020.07.030>

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