Nilotinib

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QTc prolongation: 2 case reports

In a study, a 32-year-old woman and an approximately 79-year-old woman were described, who developed QTc prolongation during treatment with nilotinib for chronic myeloid leukaemia (CML) [*routes and outcomes not stated; not all time to reaction onset stated*].

This report describes a 32-year-old woman (Patient 2): The woman with CML had been receiving nilotinib 800 mg/day for 8 years. By 7 July 2020, she was found to be COVID-19 positive. Subsequently, she received off-label treatment with hydrochlorothiazide and azithromycin. However, she developed QTc prolongation (430ms) secondary to nilotinib. Due to QTc prolongation, nilotinib therapy was discontinued. In 7 days, she recovered from COVID-19.

This report describes an approximately 79-year-old woman (Patient 4): The woman with various comorbidities had been receiving nilotinib 600 mg/day for 7 years for CML. Additionally, she had been receiving various concomitant medications. In 2013 (at an approximate age of 79 year), she developed QTc prolongation, which needed nilotinib dose reduction. By 7 July 2020 (at the age of 86 years), she was found to be COVID-19 positive. Subsequently, she received off-label treatment with hydrochlorothiazide and azithromycin. Also, she received prophylactic enoxaparin sodium [enoxaparin]. However, she developed QTc prolongation (420ms) secondary to nilotinib. Due to QTc prolongation, nilotinib therapy was discontinued. In 12 days, she recovered from COVID-19.

Yilmaz U, et al. COVID-19 in chronic-phase chronic myeloid leukemia patients: A single-center survey from Turkey. Turkish Journal of Haematology 38: 79-81, No. 1, Jan 2021. Available from: URL: http://doi.org/10.4274/tjh.galenos.2020.2020.0472

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