

Antineoplastics/ciclesonide/favipiravir

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Pancytopenia and off-label use: case report

A 43-year-old man developed pancytopenia during treatment with brentuximab vedotin, dacarbazine, vinblastine and doxorubicin for classical Hodgkin lymphoma (cHL). Additionally, he received off-label treatment with ciclesonide and favipiravir for COVID-19 [*routes, dosages and duration of treatments to reaction onset not stated*].

The man presented with complaints of fever. Prior to 4 months of current presentation, he was detected with mixed cellularity cHL with an Ann Arbor classification stage IVB. He started receiving A+AVD chemotherapy regimen comprising brentuximab vedotin, doxorubicin, vinblastine and dacarbazine. At the time of his third chemotherapy cycle, he presented with a fever of 38.4°C (current presentation). Further investigations were consistent with a diagnosis of COVID-19 [*aetiology not stated*], following to which he was admitted under isolation. He was recruited in a clinical trial and received off-label antiviral treatment with ciclesonide and favipiravir. Thereafter, his condition showed improvement but fever persisted for few days. During this clinical course, he also developed pancytopenia secondary to chemotherapy with brentuximab vedotin, dacarbazine, vinblastine and doxorubicin.

The man received treatment with filgrastim for pancytopenia [*outcome not stated*]. With respect to COVID-19, he was discharged on day 14 of admission following completion of the off-label treatment. Few days later, his condition worsened and he was re-admitted with a newly detected opacity, indicative of a progressive condition with COVID-19 pneumonia. He then received remdesivir, which led to a significant improvement in his condition and after 29 days of clinical course, he was discharged home without any recurrence of COVID-19 symptoms.

Fujii H, et al. Prolonged persistence of SARS-CoV-2 infection during A+AVD therapy for classical Hodgkin's lymphoma: A case report. *Current Problems in Cancer* 45: 100739, No. 6, Dec 2021. Available from: URL: <http://doi.org/10.1016/j.currprobcancer.2021.100739>

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