

**VANCOUVER HOSPITAL & HEALTH SCIENCES CENTRE
CSU PHARMACEUTICAL SCIENCES
SPECIAL ACCESS DRUG DATA SHEET**

DRUG NAME

Cidofovir

ALTERNATE NAMES

Vistide®, HPMPC

MANUFACTURER

Heritage Pharmaceuticals

STRENGTH

375 mg/5 mL vial

DOSAGE FORM

Injection

INDICATIONS

- Cidofovir is a selective inhibitor of viral DNA polymerase, which suppresses viral replication.
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DOSAGE AND PREPARATION**Adenovirus infection in cord blood transplant patients**

- Preemptive Treatment
- Proven or Probable disease treatment
- 3 to 5 mg/kg IV weekly for 2-3 weeks
- 5 mg/kg IV weekly for 2 to 3 weeks, then every other week

CMV Retinitis

- Induction dose: 5mg/kg IV once weekly for 2 weeks. Maintenance dose: 5mg/kg IV once every 2 weeks.
- Reduce maintenance dose to 3mg/kg if serum creatinine rises by 25-35µmol/L from baseline during treatment.

BK viruria

- 0.5 - 1 mg/kg IV once weekly until symptom resolution

Prepare under the biohazard hood

Dilute dose in 100mL normal saline

Absolute expiry of cidofovir in 100mL NS is 24hrs at room temperature or refrigerated.

ADMINISTRATION

- Infuse over 1 hour
 - Probenecid must be administered concurrently with each cidofovir dose.
 - Give probenecid 2 g PO 3 hours prior to cidofovir then 1 g PO at 2 hours and 8 hours post infusion. (Not required when using BK viruria dose)
 - 1 L NS must be infused over 1 to 2 hours immediately prior to each cidofovir dose. If possible, a second litre of NS should be initiated at the start of the infusion or immediately after the infusion. Infuse second litre over 1 to 3 hours. (Not required when using BK viruria dose)
 - Do not mix with any other solutions or medications.
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POTENTIAL ADVERSE EFFECTS*

- Nephrotoxicity is the major dose-limiting toxicity. Renal function must be monitored within 48hrs prior to each dose of cidofovir.
 - Neutropenia may occur, and neutrophil count should be monitored.
 - Metabolic acidosis, decreased intraocular pressure, uveitis, iritis, nausea and vomiting, fever, infection, and dyspnea have occurred.
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SPECIAL PRECAUTIONS

- Use cytotoxic precautions when handling this drug
 - Contraindicated in
 - patients with a serum creatinine > 132µmol/L, creatinine clearance ≤ 55mL/min or urine protein ≥100mg/dL.
 - patients receiving agents with nephrotoxic potential. Such agents must be discontinued at least 7 days prior to starting therapy with cidofovir
 - patients with hypersensitivity to cidofovir
 - patients with a history of clinically severe hypersensitivity to probenecid or other sulfa-containing medications
 - Do not administer cidofovir concurrently with other nephrotoxic drugs (e.g. aminoglycosides, amphotericin B, foscarnet, pentamidine, vancomycin, NSAIDs). Nephrotoxic drugs must be discontinued at least 7 days prior to therapy with cidofovir
 - Cidofovir is not available on the Canadian market. Approval must be obtained from the Health Canada Special Access Programme. Please refer to product monograph for more detailed information
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***REPORT ANY ADVERSE DRUG REACTIONS TO CSU PHARMACEUTICAL SCIENCES**

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