

Title: CMV Infection Outcomes, Treatment Patterns and Healthcare Resource Utilization Following Solid Organ Transplant

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Background

Cytomegalovirus (CMV) infection is a common complication in transplant patients. Modern evidence of clinical practice for the management of CMV after solid organ transplant (SOT) is needed to understand unmet therapeutic needs in this field and reduce this infection's impact on patients and healthcare systems.

We carried out a retrospective non-interventional medical chart review study in US and European transplant centers between 2020 and 2021 to describe the management and clinical evolution of adult SOT recipients who had a SOT after January 1, 2014 and developed CMV that was resistant, refractory or became intolerant (RRI) to conventional anti-CMV therapies.

Results

Overall, 218 patients were analyzed from 13 centers. Median time from transplant to first RRI CMV infection was 152 days. Valganciclovir was most commonly used for primary prophylaxis (97.1% of patients). Overall, 90.2% of patients received a valganciclovir-containing regimen as first-line treatment. Foscarnet-containing regimen(s) was used by 64.1% of patients who received second-line treatment (n=64). Overall, 78.9% of patients achieved CMV clearance during the first RRI episode, and 21.6% had CMV recurrence. All-cause mortality was reported in 19.7% of patients. Mortality one year after RRI identification was 11.9%. CMV-related hospitalizations were reported in 47.2% of patients (median length of hospital stay: 10 days). Most hospitalizations (87.0%) were to manage a RRI CMV episode.

Summary

Patients treated with anti-CMV conventional therapies experience new infections, complications, hospitalizations and mortality. Emerging anti-CMV drugs will increase therapeutic options for SOT recipients difficult to treat and will reduce drug-related toxicities.

You may learn more about this study at: SOT: <https://www.hra.nhs.uk/planning-and-improving-research/application-summaries/research-summaries/cm-v-outcomes-in-solid-organ-transplant-patients-v52/>