

REAL WORLD USE OF DALBAVANCIN AND ORITAVANCIN FOR OPTIMIZED OUTPATIENT ANTIMICROBIAL THERAPY IN PATIENTS INAPPROPRIATE FOR STANDARD THERAPY

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BACKGROUND

- Long acting lipoglycopeptide antibiotics (LaLGP) are currently approved for acute bacterial skin and soft tissue infections (ABSSSI) with broad-spectrum coverage against most gram-positive cocci. Multiple non-randomized studies have shown promise in treatment of bacteremia, endocarditis, pneumonia, and osteomyelitis. [1, 2]
- The aim of this review was to evaluate treatment failure by evaluating readmission or Emergency department (ED) visits for same indication. Length of therapy and adverse drug events (ADE) were also described.

METHODS

- Retrospective review of adults who received LaLGP from July 2016 to February 2022 within an integrated health system which includes 3 hospitals and 2 outpatient infusion centers.

CONCLUSION

- LaLGP were utilized for various indications other than ABSSSI with most patients having received 1-2 doses after initial lead-in therapy. There was an acceptable adverse drug event rate of 16% and readmission rate of 0% with only 2% returning to the ED.
- LaLGP are an acceptable alternative when daily outpatient antimicrobial therapy is not feasible.
- This appears to be a safe and effective alternative for non-ABSSSI indications

RESULTS

- Total of 36 patients received LaLGP
- 4 patients lost to follow-up
 - Included in sub-group analysis.
- Most common pathogen: *S. aureus*
 - 30% MRSA
 - 26% MSSA
- Median duration of therapy prior to LaLGP was **7 days**
- 2 patients seen in ED within 30 days in Non-ABSSSI:
 - Back pain
 - SOB with CHF & endocarditis
- Adverse Drug Event (ADE) occurred in 3 patients in Non-ABSSSI
 - Pt #1: somnolence
 - Pt #2: chest pain, pruritis (improved with slowed infusion)
 - Pt #3: pruritic rash & diarrhea within 24 hours of 2nd dose

Justification for Use over Standard Therapy	N (%)
Substance Abuse	16 (48)
Contraindications to venous access	5 (15)
Social Barriers (transportation/financial)	3 (9)
Allergy	1 (3)
"Best Alternative"	5 (15)
Patient preference	2 (6)
Not specified	3 (9)

Non-ABSSSI Indications for LaLGP	N (%)
Bacteremia	5 (22)
Bursitis	1 (4)
Cardiac Device related Endocarditis	1 (4)
Endocarditis	2 (9)
Osteomyelitis	2 (9)
Prosthetic Joint Infection	2 (9)
Septic arthritis	6 (26)
Spinal	3 (13)
Tenosynovitis	1 (4)

	ABSSSI N (%)	Non-ABSSSI N (%)
Agent Selection		
Dalbavancin	6 (50)	2 (9)
Oritavancin	6 (50)	21 (91)
Number of doses		
1	9 (75)	8 (35)
2	3 (25)	5 (22)
3	0 (0)	2 (9)
4	0 (0)	2 (9)
5	0 (0)	4 (17)
6	0 (0)	1 (4)
8	0 (0)	1 (4)
Adverse Drug Event		
Yes	0 (0)	3 (16)
No	12 (100)	15 (79)
Not Specified	0 (0)	1 (5)
Readmission for same indication (30 days)		
Yes	2 (17)	0 (0)
No	10 (83)	19 (100)
ED visit for same indication (30 days)		
Yes	0 (0)	2 (11)
No	12 (100)	17 (90)

REFERENCES

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2. Gatti M, Andreoni M, Pea F, Viale P. Real-World Use of Dalbavancin in the Era of Empowerment of Outpatient Antimicrobial Treatment: A Careful Appraisal Beyond Approved Indications Focusing on Unmet Clinical Needs. *Drug Des Devel Ther.* 2021;15:3349-3378. Published 2021 Aug 3. doi:10.2147/DDDT.S313756