

Treatment, with apheresis technique of Cascade Filtration, of iatrogenic hypertriglyceridemia in a patient affected by ALL



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Introduction

Severe hypertriglyceridemia has been identified, according to a recent international document, with values higher than 882 mg/dL. In this case report, the clinical case of a patient affected by ALL (Acute lymphocytic leukemia) is described, in which hypertriglyceridemia arises following therapy with Peg-ASP (Pegylated-Asparaginase).

Methods

The patient, D.A., 49 years old, male, is already known to our hospital as a patient affected by ALL for which he is followed by the Hematology department. On 16/08, following an evolutionary finding of the pathology, he is included in the therapeutic protocol which includes, among other things, therapy with PEG-ASP.

A few days later, he developed severe hypertriglyceridemia with values of 1865 mg/dl. Drug therapy was started in association with a selective plasmapheresis procedure (cascade filtration) using the Fresenius Kabi Amicus cell separator and the Aferetica Plasmapher Apherlungs system with an associated EVALUX 5A20 filter.

Results

After two days, the patient underwent blood tests and an ultrasound scan. The latter excluded the presence of organ damage and the triglyceride value was reduced by approximately 80% (416 mg/dl). The control parameters following the apheresis treatment were also within acceptable ranges; at the dosage of Fibrinogen, a decrease of about 40% is found compared to the average values found in determinations prior to the apheresis procedure before the start of therapy with PEG-ASP.

Conclusion

The reported case demonstrates how, the careful monitoring of the side effects of pharmacological therapies associated with the rapid involvement of the various specialist figures as well as the use of the right therapeutic strategy, can produce positive effects in a short time, such as to avoid even severe complications, with therapeutic techniques almost free from important side effects.