



# ABS034

## SEVERE ANAPHYLAXIS WITH OXALIPLATIN THERAPY IN A PATIENT WITH COLON CANCER: A CASE REPORT

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Oxaliplatin is a third-generation platinum analogue that is mainly used in the treatment of advanced colorectal cancer. The reported incidence of hypersensitivity reactions to oxaliplatin, especially after multiple cycles of therapy, is less than 1% .

Anaphylactic shock refers to anaphylaxis associated with systemic vasodilation, resulting in low blood pressure, and is also associated with severe bronchoconstriction .

Here we report a patient with adenocarcinoma of the colon who developed an anaphylactic shock following oxaliplatin administration during the sixth cycle of combination chemotherapy with FOLFOX-4 regimen (Oxaliplatin, 5-fluorouracil and leucovorin), despite the usual premedication with dexamethasone.

All the initial 10 cycles of chemotherapy with FOLFOX-4 was very well tolerated. He had a grade 1 neuropathy after his 9<sup>th</sup> cycle and grade 2 in 10<sup>th</sup> cycle. During his 11<sup>th</sup> cycle of chemotherapy, immediately after starting oxaliplatin, he developed severe hypotension, tachycardia, painful burning sensation all over the body and diffuse pruritis and was diagnosed to have anaphylactic shock. He responded to adrenalin, intravenous steroids and IV fluids and the reaction got resolved completely. After stabilization chemotherapy was continued by skipping oxaliplatin.

A Taiwan study in 2006 by Lee et al reported that 4 cases out of 303 patients who developed serious adverse reactions following oxaliplatin with an incidence of 1.32%.

Previous studies showed that anaphylaxis occurs after 7-9 cycles. Our patient developed during the 11<sup>th</sup> cycle. Physicians should be vigilant on every patient on oxaliplatin especially after the first 6 cycles.

Since data are insufficient to prove prolongation of infusion time as well as the prophylactic use of steroid and antihistamines is effective, the rechallenge with oxaliplatin should be done only in selected patients.

**Keywords: Oxaliplatin, Anaphylaxis**