

**THE CASE OF SUCCESSFUL USE OF REZAFUNGIN IN A PEDIATRIC PATIENT WITH MIXED INFECTION CAUSED BY YEAST IN THE REPUBLIC OF BELARUS**

**E-POSTER VIEWING: AS06. IMMUNOLOGY & COMPROMISED HOST / AS06F. SEVERE/SYSTEMIC FUNGAL INFECTIONS**

Katerina Divakova<sup>1</sup>, A Niafiodava<sup>2</sup>, Sviatlana Kandaurova<sup>2</sup>, Natalya Mikhailik<sup>2</sup>, Khusrav Kiemidinov<sup>2</sup>, Mikhail Tchernovetsky<sup>2</sup>, Tatiana Kulbitskaya<sup>2</sup>, Elena Kishkurno<sup>3</sup>

<sup>1</sup>Belarusian State Medical University, Pediatric Infectious Diseases Department, Minsk, Belarus, <sup>2</sup>Belarusian Research Center for Pediatric Oncology and Hematology, Minsk, Belarus, <sup>3</sup>Belarusian State Medical University, 1st Childhood Diseases Department, Minsk, Belarus

**Title of Case:** The case of successful use of Rezafungin in a pediatric patient with mixed infection caused by yeast in the Republic of Belarus

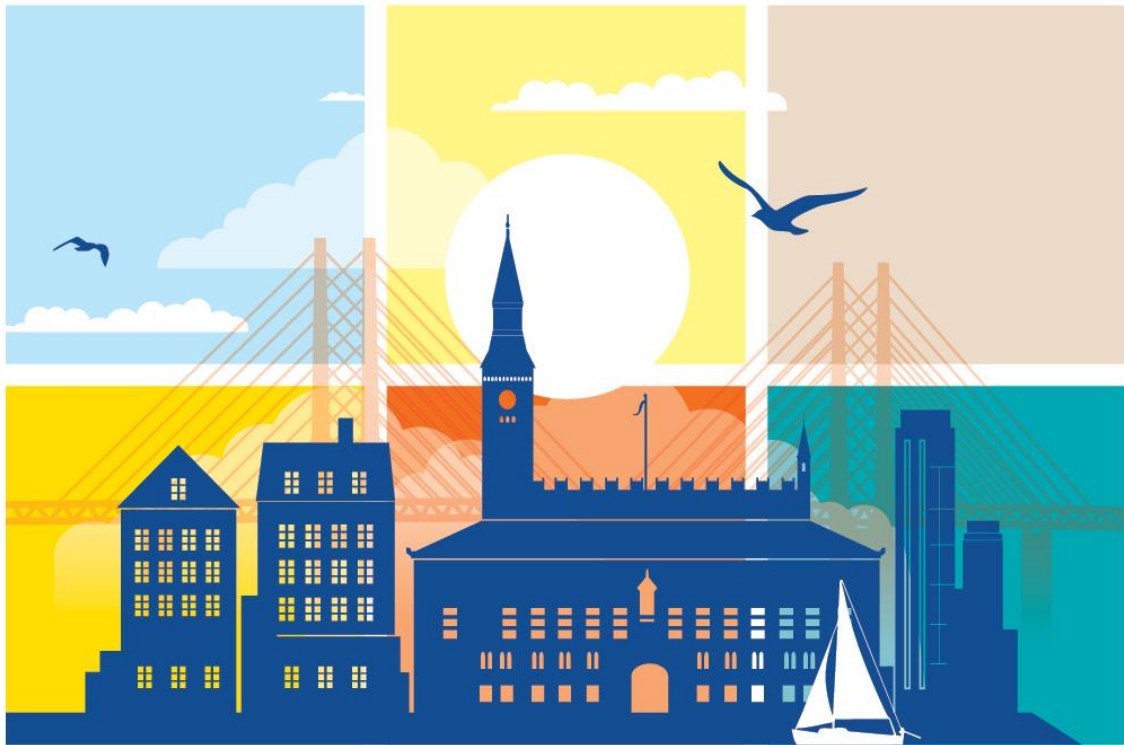
**Background:** In immunocompromised patients, systemic mycosis often has a severe course. Often a low sensitivity of the pathogen to applied antimycotics is found. The criterion of effectiveness of antimycotics application is the disappearance of clinical and instrumental signs of infection.

**Case Presentation Summary:** Patient 10 years (weight-30 kg) with low-graded neuroblastoma in anamnesis and secondary MDS is hospitalized with fever up to 3-4 times a day against the background of prolonged neutropenia and signs of pericarditis. CT-angiography confirms pericarditis. Prednisolone 10 mg per day has been added to the treatment regimen. *Candida tropicalis* has been isolated for sterility in the blood test, *Rhodotorula mucilaginosa* is isolated during the seeding of pericardial fluid (MIC voriconazole, posaconazole, isavuconazole and micafungin – more than 32, MIC fluconazole – 256, MIC for amphotericin B – 0.125mcg/ml). The child was given combined antifungal therapy (amphotericin B lipid complex and micafungin). Due to the lack of effect of combined antifungal therapy, Rezafungin was appointed off-label. There are no data on the use of the drug in children, it was decided to prescribe 200mg once as a loading dose, then 100 mg weekly. Patient received five Rezafungin injections. After the first introduction there was a positive trend with further resolution of the infectious process. There are no side effects during and after the therapy.

**Learning Points/Discussion:** Rezafungin can be used effectively in children's treatment schemes. However, further clinical trials are needed.

# ESPID 2024

## ABSTRACT BOOK



42<sup>ND</sup> ANNUAL MEETING OF THE

# EUROPEAN SOCIETY FOR PAEDIATRIC INFECTIOUS DISEASES

Organised jointly by ESPID and the ESPID Foundation



COPENHAGEN  
& ONLINE  
20-24 MAY  
2024



#ESPID2024

[espidmeeting.org](https://espidmeeting.org)