Dasatinib



Chylous pleural effusions in an elderly patient: case report

A 71-year-old woman developed chylous pleural effusions while receiving dasatinib.

The woman developed progressively worsening dyspnoea on exertion. Five years earlier, she had been diagnosed with leukaemia, and had started imatinib. Due to adverse events from imatinib, she had started dasatinib 100mg daily [route not stated; time to reaction onset not clearly stated]. Upon examination, a chest x-ray revealed bilateral pleural effusions. An echocardiogram showed only minimal mitral regurgitation, a small pericardial effusion, and borderline left atrial enlargement.

Despite receiving diuretics, the woman's dyspnoea progressed. Three months later, a repeat echocardiogram showed mitral regurgitation. The previous pericardial effusion had resolved, and the left atrium was mildly dilated. She underwent a right-sided thoracentesis that yielded 1100mL of yellow fluid. Cytology revealed chylomicrons. Dasatinib was withdrawn after 3 years of treatment. Three months later, a diagnostic thoracentesis was repeated. The effusions were small, with left being greater than right. The fluid was hazy yellow with chylomicrons present.

Author comment: "Dasatinib is a [tyrosine kinase inhibitor] that produces lymphocyte-predominant, exudative pleural effusions that can be chylous."

Nestor J, et al. Dasatinib-induced chylous pleural effusions. Clinical Pulmonary Medicine 21: 42-45, No. 1, Jan 2014. Available from: URL: http://doi.org/10.1097/CPM.000000000000018 - USA 803099011