

Oseltamivir

Various toxicities in paediatric patients: 6 case reports

Five infants and one neonate [sexes *not stated*] were identified from a retrospective study after they developed various toxicities while receiving oseltamivir as either treatment or prophylaxis for influenza A virus H1N1 subtype.

A 31-day-old infant with influenza A virus H1N1 infection received oral oseltamivir 4.0 mg/kg twice daily for 5 days. On day 5, the patient developed an erythematous rash and abnormal levels of AST and ALT. The rash resolved with diphenhydramine after 2 days and transaminase levels returned to baseline within 5 days of completing treatment.

A 64-day-old infant received oral oseltamivir 3.1 mg/kg once daily for 10 days as prophylaxis against influenza A virus H1N1 infection. An erythematous papular rash developed on the patient's face on day 7 of prophylaxis, and resolved without treatment within 2 days. Oseltamivir treatment was continued uninterrupted.

A 14-day-old neonate and a 118-day-old infant developed GI symptoms while receiving prophylactic oral oseltamivir 3.9 mg/kg once daily and 4.3 mg/kg once daily, respectively. The neonate developed diarrhoea on day 2 of oseltamivir that lasted 48 hours, while the infant experienced a single episode of bilious vomiting on day 5. Both patients completed an uninterrupted 10-day course of oseltamivir.

Two infants, aged 192 days and 140 days, received 5-day courses of oral oseltamivir 6.6 mg/kg twice daily and 7.6 mg/kg twice daily, respectively, for influenza A virus H1N1 infection. Both infants developed elevated transaminase levels at the end of 5 days of treatment. The first infant, who had pre-existing liver disease associated with Alagille syndrome, had a return to baseline levels at 14 days after completing therapy. The second infant's enzymes values decreased to baseline levels within 5 days of treatment completion.

Pannaraj PS, et al. Oseltamivir treatment and prophylaxis in a neonatal intensive care unit during a 2009 H1N1 influenza outbreak. *Journal of Perinatology* 31: 487-493, No. 7, Jul 2011. Available from: URL: <http://dx.doi.org/10.1038/jp.2010.159> - USA

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