

Isavuconazonium sulfate (Cresemba™)

Spectrum of Activity:

- Isavuconazonium sulfate (Isavuconazole) has broad coverage against *Candida*, *Aspergillus*, dimorphic fungi, *Fusarium* spp., as well as Zygomycetes (e.g. mucor)

Acceptable uses

- Mucormycosis
 - Sequential therapy following induction with amphotericin B
- Aspergillosis
 - If voriconazole contraindicated (e.g. prolonged QTc > 500)

Unacceptable uses

- Should be avoided in pregnancy
- CNS infection

Dosing

- Mucormycosis/aspergillosis
 - Loading dose: 372 mg IV/PO q8h x 6 doses
 - Maintenance dose: 372 mg IV/PO q24h (beginning 12-24 hrs after loading dose)
 - 372 mg isavuconazonium sulfate contains 200mg isavuconazole
- Formulations:
 - Capsule
 - Highly bioavailable. Absorption is not impacted by acid or food.
 - IV
 - No cyclodextrin
- Dose Adjustments:
 - Renal: no dosing adjustments recommended
 - Hepatic Impairment:
 - Mild to Moderate (Child-Pugh A/B): reduction of maintenance dose to 100mg daily recommended
 - Severe (Child-Pugh C): Risk versus benefit must be weighed. Contact ID pharmacist for dosing recommendation.

Monitoring

- Adverse Reactions: Nausea, vomiting, diarrhea, elevated LFTs, *shortened* QTc
- Labs/Tests: AST/ALT at baseline and every 1-2 weeks after, baseline ECG
- Drug interactions: As a CYP-enzyme inhibitor, itraconazole has significant drug interactions including oral anticoagulants, anti-epileptics, anti-arrhythmics, SSRIs, antipsychotics, and immunosuppressants.

Notes

- Isavuconazonium sulfate is restricted to infectious disease services.