抗体医薬品及び免疫抑制作用を有する各種薬剤の
投与症例におけるウイルス感染プロファイルの比較と
これを利用したウイルス感染のリスク分析

小林 哲*, 遊佐 敬介*, 川崎 ナナ*

（受付：平成25年9月6日, 受理：平成26年4月3日）

Comparative Study of Viral Infection Profiles during Treatment with Antibody Pharmaceuticals and Various Immunosuppressants and Risk Analysis of Viral Infection

Tetsu KOBAYASHI*, Keisuke YUSA* and Nana KAWASAKI*

Summary

In order to compare viral infection profiles during treatment with various immunosuppressants, viral infection case reports were extracted from open-source data available in the form of spontaneous reports published on the homepage of the Pharmaceutical and Medical Devices Agency on February 1, 2013. Among a total of 1920 cases extracted, cytomegalovirus (CMV) infection was reported in 761 cases, and varicella–zoster virus (VZV) infection was reported in 690 cases. CMV was common after treatment with basiliximab or micophenolate mofetil (77% and 62%, respectively), and VZV was predominant after treatment with adalimumab, infliximab, etanercept, or tocilizumab (97%, 72%, 86%, and 82%, respectively). In addition, BK virus, Epstein–Barr virus (EBV), herpes simplex virus, JC virus, parvovirus B19, adenovirus, and RS virus infections were reported in 167, 108, 62, 52, 37, 32, and 11 cases, respectively. Risk analysis of each virus was performed based on the likelihood of infection (reported number of cases) and the severity of outcome (percentage of serious outcomes). JCV, EBV, and CMV received high scores in this risk analysis.

Key words

Viral infection, Immunosuppressant drugs, Risk analysis, Cytomegalovirus, Varicella–zoster virus, JC virus, Epstein–Barr virus