


Turkish Journal of Medical Sciences

Turkish Journal
of
Medical Sciences

Cefoperazone-sulbactam plus amikacin empirical therapy for febrile neutropenia in children with cancer

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 [Keywords](#)
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Abstract: Aim: To determine the efficacy and safety of cefoperazone-sulbactam combined with amikacin in the treatment of febrile neutropenia in children with cancer. Materials and Methods: The study included 20 cancer cases with 26 febrile neutropenia (FEN) episodes. Patient selection criteria were defined according to the guidelines issued by the Infectious Disease Society of America (IDSA). Results: Patients diagnosed with acute leukemia (58%) and solid tumors (42%) were recorded. Twelve (46.2%) of the primary disease cases were refractory. The number of infection episodes identified microbiologically and clinically was 10 (38.5%) and 12 (46.1%), respectively. Fever of unknown origin was observed in only 4 cases (15.4%). The success rate of the empirical treatment without additional modification was 42.3% (11 FEN episodes). Four episodes (15.4%) needed a replacement for sulbactam/cefoperazone because of persistent fever, adverse reactions, and/or clinical deterioration. Three patients died because of relapse or because they were refractory. As 15 (57.7%) of the patients deteriorated clinically and had fever, glycopeptide antibiotics were given after 48-72 h. The overall response rate at the end of the therapy was 80.8%, with/without modification. Conclusions: The combination of sulbactam/cefoperazone plus amikacin was effective and safe in the treatment of febrile episodes in neutropenic pediatric cancer patients.

Key words: Neutropenic fever, childhood, cefoperazone/sulbactam, amikacin

Turk J Med Sci 2009; **39**(4): 635-640.

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