Transplant Infectious Diseases Update

The CTC Transplant Infectious Diseases (TID) Group now includes 6 faculty members (Michael Angarone, DO, John Flaherty, MD, Michael Ison, MD MS, Sudhir Penugonda, MD MPH, Valentina Stosor, MD and Sajal Tanna, MD MPH) and provides consultative care to transplant recipients with infectious complications through inpatient consult service and ambulatory clinic. In addition to its clinical mission, the group continues to advance the field through a range of important clinical studies to improve our understanding of the epidemiology of post-transplant infections, to develop optimal approaches to preventing infection and to address gaps in our treatment armamentarium.

One of the largest studies that the group is leading is the Nitazoxanide for Norovirus in Transplantation Study (NNITS, ClinicalTrials.gov NCT03395405). This $6.5 million study is funded by NIAID to assess the safety and clinical and virologic efficacy of nitazoxanide for the treatment of norovirus in transplant patients. The study brings together investigators at 10 major transplant centers (Cincinnati Children’s Hospital Medical Center, Johns Hopkins University, University of Alabama at Birmingham, University of Kansas, University of Michigan, University of Nebraska, University of North Carolina at Chapel Hill, University of Pittsburgh, and the University of Washington, in addition to Northwestern University) in the US to enroll patients over the next 4 years.

The team is also participating in 2 large NIH-funded studies to assess the efficacy of high dose influenza vaccine in hematopoietic stem cell transplant recipients and HPV vaccine in kidney transplant recipients. These studies will hopefully establish new standard for protecting our patients against common, vaccine preventable diseases. The group is also hoping to start a study of a novel HBV vaccine in transplant candidates in the coming months as well.

We are participating in studies of new therapies for resistant HSV (pritelivir, NCT03073967) and CMV (maribavir, NCT02931539). Both agents are oral agents that represent alternatives for foscarnet which is traditionally reserved for the treatment of resistant HSV and CMV and associated with electrolyte disturbances and nephrotoxicity. Additionally, we are collaborating with the Bloom Lab at the University of Washington to do a study of the evolution of influenza and RSV in transplant recipients. This study will hopefully lead to a NIH-funded study of influenza in this population.

Additionally, the NUCTC TID team is actively engaged in improving availability and outcomes of transplantation for HIV infected individuals. To this end, it is participating in the NIAID-sponsored HOPE in Action studies that are assessing the safety and outcomes of using HIV + donors in HIV+ recipients (NCT03500315, NCT03734393). Additionally, the team is participating in an NIAID-sponsored study to assess the impact of maraviroc, a CCR5 inhibitor approved for the treatment of HIV, on the outcomes of renal transplantation in HIV+ recipients (NCT02741323).

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