Correction: Prevention of Hemorrhagic Cystitis after Cyclophosphamide
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To the Editor: In the urologic effects section (page 418, second column, first sentence) of the review on surviving adult cancers (1), it is erroneously stated that ifosfamide may prevent the occurrence of cystitis after cyclophosphamide administration. Ifosfamide is an antineoplastic agent that is a structural isomer of cyclophosphamide. Like cyclophosphamide, it can induce hemorrhagic cystitis, presumably by the same mechanism (that is, liberation of acrolein in the bladder) (2). Cystitis induced by either of these oxazaphosphorines can be prevented by co-administration of mesna (sodium 2-mercaptoethanesulphonate), a compound that increases free thiol concentrations in the bladder, which can bind to and detoxify acrolein (3). Mesna is now available commercially in the United States.

The authors may have intended to write that mesna can be given with cyclophosphamide to prevent hemorrhagic cystitis. There is no clinical indication for the co-administration of ifosfamide and cyclophosphamide, as this would most likely increase the risk and severity of their overlapping toxicities, including cystitis.

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References

In response: We agree that giving mesna (not ifosfamide) with cyclophosphamide can prevent cystitis and that there is no indication for concomitant use of ifosfamide and cyclophosphamide, which both cause cystitis. There are additional references related to this issue (1, 2).

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References