

Comparison of Mw\Pharm 3.30 (DOS) and Mw\Pharm ++ (Windows) Versions of Pharmacokinetic Software for PK/PD Modelling of Vancomycin in Continuous Administration

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Objective: For a long time, the Mw\Pharm software suite (MEDI\WARE, Prague, Czech Republic/Groningen, Netherlands) has been used for PK/PD modelling in therapeutic drug monitoring (TDM). The aim of this study was to find the best model in the newer Windows version of Mw\Pharm++ 1.3.5.558 (WIN) for continuous administration of vancomycin.

Patients: Twenty adult patients with a mean age of 66 ± 12 years, body weight 85 ± 16 kg, and median dose 1,625 g/24 h were repeatedly examined for vancomycin.

Methods: Concentrations predicted by "#vancomycin_adult_k_C2", "#vancomycin_adult_C2", "vancomycin_adult_C2", "vancomycin_C1" WIN models and "vancomycin (cont.inf.) %ahz" (DOS1) and "vancomycin adult" DOS models were compared with the measured values and with the DOS1 model.

Statistics: Percentage prediction error (%PE) calculated as (predicted-measured)/measured or (predicted-DOS1)/DOS1, RMSE, Bland-Altman bias, Pearson's coefficient of rank correlation (R), Student's t-test. Statistical analysis was performed using the GraphPad Prism version 5.00 for Windows.

Results: %PE values varied between $-3.2 \pm 33.0\%$ and $-7.4 \pm 36.7\%$, with the exception of "vancomycin_C1", the only one-compartment model, where it was $-20.8 \pm 39.4\%$. The best outcomes were achieved with "vancomycin adult". The "#vancomycin_adult_k_C2" model produced the lowest %PE, RMSE, and Bland-Altman bias among the WIN models, but its correlation (Pearson's R) was less tight. RMSE was the same in "vancomycin_adult_C2" while %PE and Bland-Altman bias were similar, with slightly better correlation when compared to "#vancomycin_adult_k_C2". The %PE value between the two DOS models was $4.1 \pm 13.9\%$ (NS); "vancomycin adult" produced slightly better outcomes than DOS1.

Conclusion: "vancomycin_adult_C2" and "#vancomycin_adult_k_C2" produced the best outcomes between WIN models. Both DOS models produced lower bias and their prediction was comparable.

Key words: PK/PD modelling, vancomycin, Mw\Pharm, therapeutic drug monitoring, continuous administration.

Porovnání Mw\Pharm 3.30 (DOS) a Mw\Pharm ++ (Windows) verze farmakokinetického softwaru pro PK/PD modelování hladin vankomycinu aplikovaného v kontinuální infuzi

Účel studie: Mw\Pharm software (MEDI\WARE, Prague, Czech Republic / Groningen, Netherlands) je dlouhodobě používán pro PK/PD modelování pro terapeutické monitorování hladin léčiv (TDM). Cílem práce bylo najít nejvhodnější model pro kontinuální aplikaci vankomycinu v novější Windows verzi Mw\Pharm++ 1.3.5.558 (WIN).

Pacienti: 20 dospělých pacientů (průměrný věk 66 ± 12 let, hmotnost 85 ± 16 kg), bylo opakovaně vyšetřeno na hladinu vankomycinu. Medián dávky byl 1 625 g/24 h. Koncentrace vankomycinu predikované pomocí WIN modelů „#vancomycin_adult_k_C2“, „#vancomycin_adult_C2“, „vancomycin_adult_C2“, „vancomycin_C1“ a DOS modelů „vancomycin (cont.inf.) %ahz“ (DOS1) a „vancomycin adult“ byly porovnány s naměřenou hodnotou a DOS1 modelem.