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Summary

IL-6 INHIBITOR AS PALLIATIVE TREATMENT FOR A 63 YEARS-OLD MALE PATIENT SUFFERING STAUFFER'S SYNDROME-RELATED PARANEOPLASTIC CHOLESTASIS

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Hepatobiliary

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A case report describes off-label tocilizumab treatment for Stauffer's syndrome, a rare paraneoplastic cholestatic syndrome in advanced renal cell carcinoma, with temporary clinical improvement.

KEY POINTS

- A 63-year-old male with chemorefractory advanced renal cell carcinoma and brain metastases presented with fever, weight loss, severe cholestasis, and jaundice with compromised liver function
- Extensive workup excluded drug-induced liver injury, viral hepatitis, autoimmune causes, and biliary tract disease; markedly elevated serum IL-6 levels supported a diagnosis of Stauffer's syndrome
- After high-dose intravenous prednisone (1 mg/kg/day) failed, off-label tocilizumab (8 mg/kg single intravenous infusion) was administered with clinical and biochemical improvement over two weeks
- The patient was discharged but died 40 days later from brain metastases complications
- The authors suggest considering Stauffer's syndrome in advanced-stage cancer patients with unexplained acute cholestasis and propose IL-6 inhibitors as a potential palliative approach

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