Caspofungin

Also called: Cancidas; Caspofungin acetate; MK-0991

What it is

A cyclic lipopeptide echinocandin antifungal, approved as Cancidas (2001), given by daily intravenous infusion for candidaemia, invasive candidiasis and refractory aspergillosis.

Approval status

FDA Approved. Approved in the US as Cancidas (Merck), NDA 021227, on January 26, 2001, for adults and children 3 months and older; generics are marketed (Drugs@FDA via openFDA and the Cancidas label, read October 3, 2026). Drugs@FDA now lists Cancidas itself as discontinued; generic caspofungin remains marketed (openFDA Drugs@FDA, read October 5, 2026).

Dosing, as printed in the page's Recommended Dosing box

Manufacturer's recommended dosing (FDA label)

From the prescribing information. Other doses studied, if any, are in the full dosing data below.

Protocol and source	Dose	Frequency	Duration	Route
Label: adults, all indications except oesophageal candidiasis **[Approved label]** Caspofungin acetate for injection US prescribing information (Sagent; DailyMed set 08fb61ee, effective July 29, 2026)	70 mg loading dose, then 50 mg	Once daily	Set by indication and response	Intravenous, over about 1 hour
Label: adults, oesophageal candidiasis **[Approved label]** Caspofungin acetate for injection US prescribing information (Sagent; DailyMed set 08fb61ee, effective July 29, 2026)	50 mg, no loading dose	Once daily	Set by response	Intravenous
Label: children 3 months to 17 years **[Approved label]** Caspofungin acetate for injection US prescribing information (Sagent; DailyMed set 08fb61ee, effective July 29, 2026)	70 mg/m² loading, then 50 mg/m² (max 70 mg)	Once daily	Set by indication	Intravenous
Label: moderate hepatic impairment (adults) **[Approved label]** Caspofungin acetate for injection US prescribing information (Sagent; DailyMed set 08fb61ee, effective July 29, 2026)	35 mg daily (70 mg loading where appropriate)	Once daily	As above	Intravenous

Educational information, not medical advice. Each dose above is tagged with its source: an approved label, a published human study, animal data, or amounts reported by users. None is a recommendation for you. An unapproved compound has no established safe or effective human dose, and products sold for "research use only" are not made or tested for people. Talk to a doctor before acting on anything on this site, including before you start, stop or change any medicine or dose.

Key human evidence

The first 3 of the 14 human studies carded on the page (18 study cards in all):

• **Against amphotericin B in invasive candidiasis** (Human, 2002). In 224 patients in the modified intention-to-treat analysis, success was 73.4% on caspofungin and 61.7% on amphotericin B, similar efficacy; among patients meeting prespecified evaluation criteria, caspofungin was superior. **PMID 12490683**

• **Empirical therapy in fever and neutropenia** (Human, 2004). In 1,095 patients, overall success was 33.9% on caspofungin and 33.7% on liposomal amphotericin B, meeting noninferiority; with baseline fungal infections, success was 51.9% against 25.9%, and survival at seven days after therapy 92.6% against 89.2%. **PMID 15459300**

• **Refractory invasive aspergillosis** (Human, 2004). Among 83 patients refractory to or intolerant of other therapy, 45% had a favourable response, including 50% with pulmonary aspergillosis; two stopped for drug-related adverse events, and kidney and liver toxicity were infrequent. **PMID 15578352**

Interactions

From the FDA label's drug-interaction section (Merck. CANCIDAS (caspofungin acetate) US prescribing information, section 7. DailyMed version of October 11, 2024, read October 3, 2026):

• With cyclosporine: raises caspofungin exposure (AUC) with transient ALT/AST increases; monitor liver enzymes (FDA label)
• With tacrolimus: monitor tacrolimus trough concentrations and adjust its dose (FDA label)
• With rifampin: expected to lower caspofungin concentrations; label gives a higher daily caspofungin dose (FDA label)
• With efavirenz, nevirapine, phenytoin, dexamethasone, carbamazepine: hepatic enzyme inducers: label says to consider a higher daily caspofungin dose (FDA label)

Side effects and cautions

Reported side effects	Contraindications and cautions
• Fewer drug-related adverse events than amphotericin B in the candidiasis trial • Infrequent kidney and liver toxicity in the aspergillosis study	• Hypersensitivity, including anaphylaxis • Liver effects and raised liver enzymes • Raised liver enzymes with cyclosporine

Five questions to ask

1. Is Caspofungin right for me, and is the labelled dose on this sheet right for my weight, age, kidney and liver function?
2. Here are the medicines and supplements I take. Do any of them interact with Caspofungin? This sheet lists the interactions on record.
3. Which side effects should make me stop and call you, for example fewer drug-related adverse events than amphotericin b in the candidiasis trial?
4. Do any of the cautions on this sheet apply to me, such as: Hypersensitivity, including anaphylaxis?
5. What should we check before I start and while I am on it (blood tests, blood pressure, weight), and how often?

Grey Peptides is a vendor-neutral encyclopedia: it sells nothing and names no seller. This sheet is educational, not medical advice, and is not a prescription.