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ADHERENCE TO ABIRATERONE AND ENZALUTAMIDE IN PATIENTS WITH METASTATIC CASTRATION RESISTANT PROSTATE CANCER

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BACKGROUND

The use of oral chemotherapy (OC) is an effective and safe approach in the treatment of metastatic castration-resistant prostate cancer (MCRP). Abiraterone and enzalutamide offer improved patient convenience and ease of administration. However, patients are now responsable for ensuring optimal adherence to their medication

PURPOSE

The aim of this study was to determine adherence to abiraterone and enzalutamide in patients with MCRP.

MATERIAL AND METHODS

Retrospective longitudinal study was carried out from September 2011 to March 2016. All patients treated with OC for MCRP were included.

Patients with only one drug dispensation were excluded, because adherence couldn't be calculated. Patient 's medical records were reviewed and following data were collected: demographics, pharmacotherapeutic (prior chemotherapy, abiraterona or enzalutamide treatment start and end date, dosing, and dispensed data).

Data were obtained from electronic clinical records, oncology prescription software and outpatient dispensing records.

Adherence to OC was evaluated indirectly using dispensation records to calculate 'medication possession rate' (MPR). MPR is defined as the sum of all days of drug supplied within a given period, divided by the total number of days in that period. Optimal adherence was defined as MPR >80%, following previous studies.

Data analysis was carried out using SPSS 15.0.

The end points were:

- ☐ Measure of adherence to enzalutamide and abiraterone.
- □Duration of treatment.
- □Percentage of patients who achieved optimal adherence.

RESULTS

45 patients (mean age 74 years (57-87)) with at least two drug dispensations, were included.

☐ 30 patients (66,6%) received abiraterone.

☐ 3 patients (6,66%) received enzalutamide.

□ 12 patients (26,66%) received both drugs sequentially.

ORAL CHEMOTHERAPY (OC)		PATIENTS (N)	MPR (%)		OPTIMAL ADHERENCE: N (%) (MPR>80%)	MEAN DURATION OF TREATMENT (MONTHS)
			Mean	Median		
ABIRAT	ERONE	39	107	102	36 (92%)	12 (2-32)
ENZAL	JTAMIDE	15	98	97	12 (80%)	5 (1-13)

CONCLUSION

- ✓ Most patients showed high rates of adherence to OC in MCRP.
- ✓ The long duration of treatment and the absence of symptons in these patients could threat the adherence to the treatment.
- ✓ Oncology Pharmacists have a key role by following patients with OC in MCRP and remarking the importance of adherence.
- ✓ Study limitations include the measure of adherence only by one method.