DATABASE DISCORDANCE IN ONCOHEMATOLOGY DRUG INTERACTIONS: A FOUR-SOURCE COMPARISON

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BACKGROUND AND IMPORTANCE

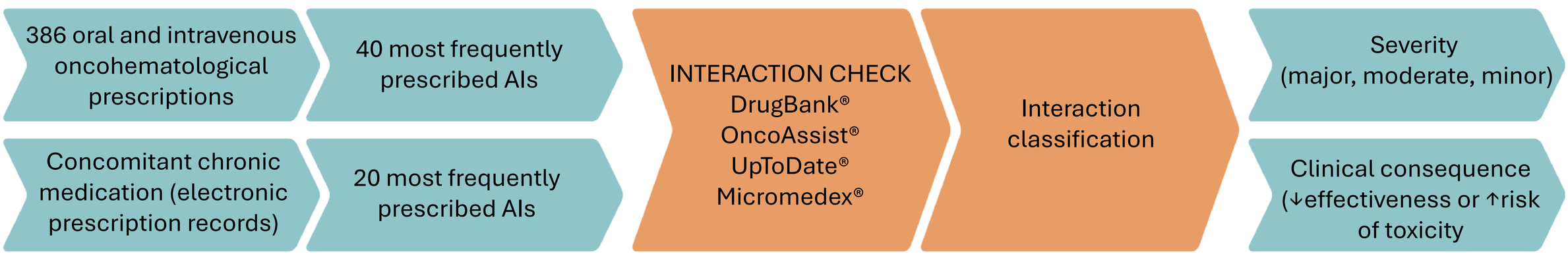
Drug–drug interactions (DDIs) are a major safety concern in oncology. These interactions may arise from pharmacokinetic or pharmacodynamic mechanisms, potentially compromising the efficacy and safety of both anticancer and concomitant therapies. There is still no universal or standardized tool to comprehensively assess DDIs.

AIM AND OBJECTIVES

To compare the identification and classification of potential DDIs between oncohematological treatments and patients' chronic medications across four commonly used databases.

MATERIAL AND METHODS

A prospective study with retrospective data collection over a one-month period (August 2025).

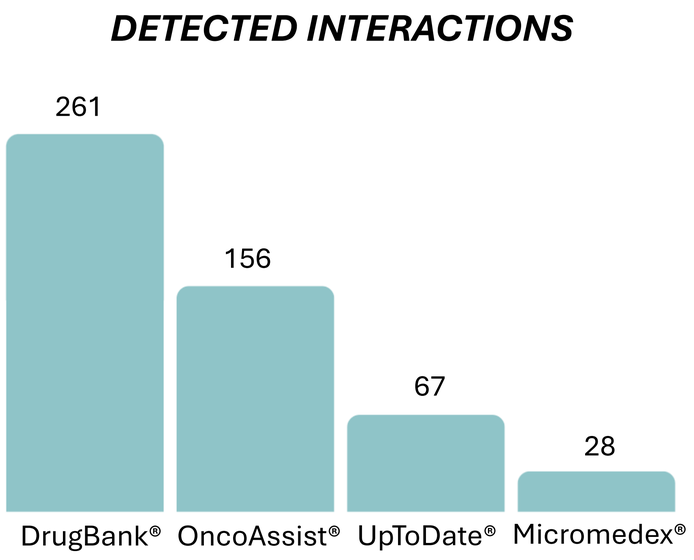


AI: active ingredient

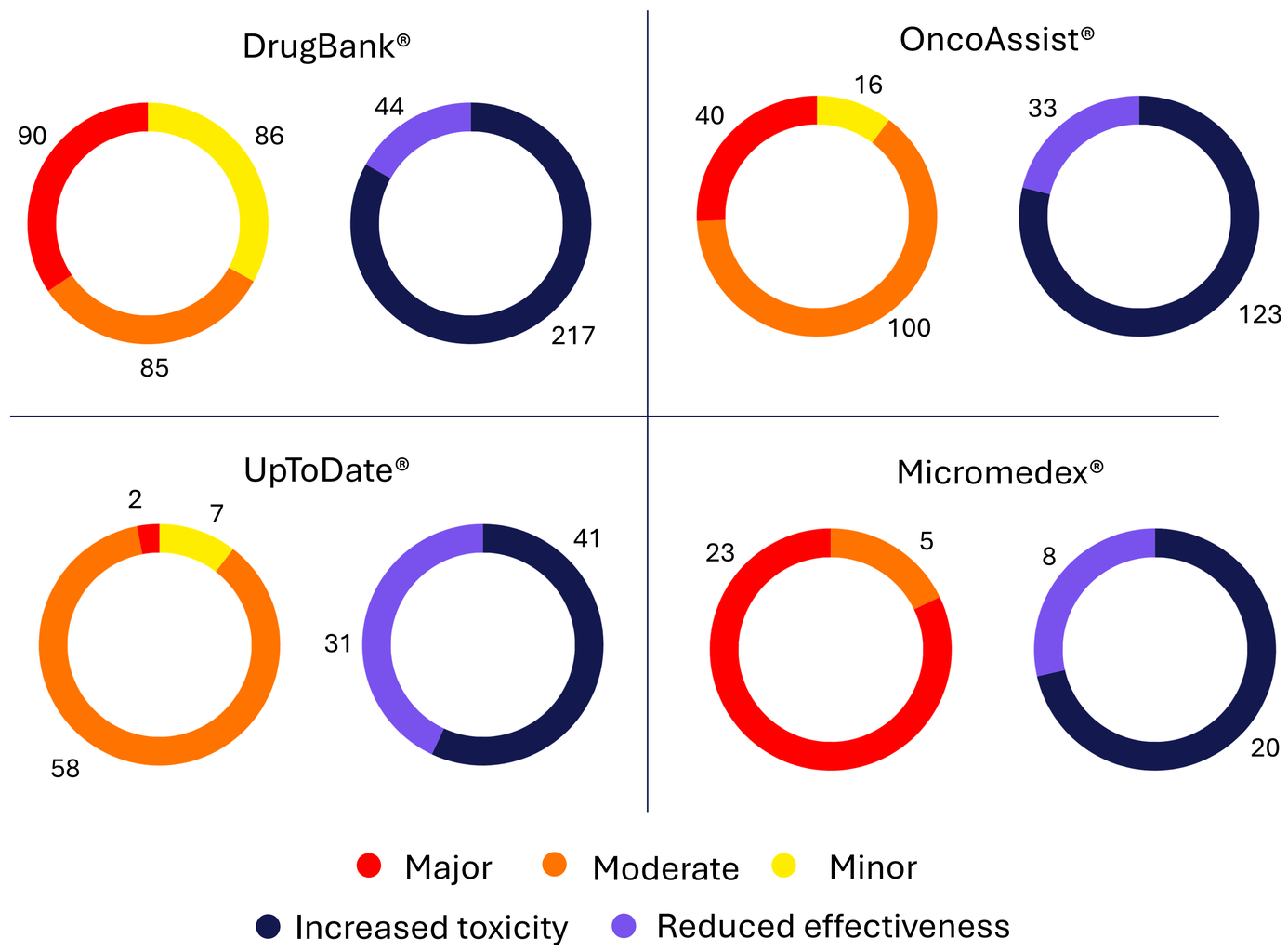
The Fleiss' kappa coefficient was used to assess the strength of agreement in DDI severity classification among the four databases and it was interpreted according to Landis and Koch's criteria.

RESULTS

A summary table including the 40 oncohematological and 20 chronic medication AIs was created.



The Fleiss' kappa coefficient for DDI detection was 0.145 (95% CI: 0.126–0.165; p<0.001), indicating slight inter-database agreement.



CONCLUSIONS AND RELEVANCE

There is considerable variability among DDI databases regarding the detection and classification of potential interactions in oncohematological prescriptions. To ensure patient safety, a multidisciplinary, case-by-case evaluation is crucial to support safe and individualized therapeutic decisions.

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