

DOSE ADJUSTMENT IN CANCER PATIENTS WITH RENAL OR HEPATIC IMPAIRMENT

Vázquez-Sánchez R, López-Esteban L, Díez-Fernández R, Martínez-Nuñez ME, Molina García T.
Hospital Universitario de Getafe, Madrid, Spain

BACKGROUND

Treatment outcomes and tolerability are not easily predicted in cancer patients receiving chemotherapy, especially in those patients with renal or hepatic dysfunction, where dose modifications become necessary.



OBJECTIVE

To evaluate drug dose modifications made in cancer patients with any grade of renal and liver impairment receiving any type of antineoplastic treatment.

METHODS

Retrospective/observational study (March 2014-June 2014)

Adult cancer patients treated with antineoplastic

Data recorded:

Age/gender
Treatment/dose
Tumor type
Body surface
Dose modification
Liver/renal function

A review of several dose modification protocols was made:

- Cancer Care Ontario
- UpToDate®
- EMA product information

1 2
3 4

N=370 patients

♂=51.6%

Age = 65.2 years

	% Patients
Liver impairment only	19%
Renal impairment only	12.5%
Both	6.25%
Total	37.75%

According to recommendations:

Dose was modified in 53.7% of the cases that needed dose modifications

Dosing recommendation protocols were followed in just 38.8%

RESULTS

▪ Protocol-guided dose modifications rate of antineoplastic therapy in renal/hepatic impairment was low.

▪ A dose modification protocol, based on guidelines, should be implemented in all units administering antineoplastic treatment.

▪ Other considerations apart from laboratory tests, such as tolerability and tumor response, should be taken into account.

CONCLUSIONS