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### **OBJECTIVES**

Currently, oral antineoplastic agents (OAA) represent around 40% of all chemotherapy. Thus, onco-hematological outpatients have acquired more autonomy and responsibility since OAA require self-administration at home. Hospital pharmacists are the latest health professionals in touch with patients and should detect problems related to these drugs

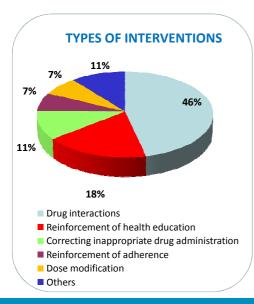
The objective of this study is to assess pharmacist interventions performed in outpatients treated with OAA in a tertiary hospital.

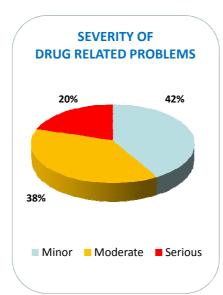
#### **METHODS**

- ✓ All patients who started treatment with OAA between January and September 2016 in the Outpatient Pharmacy were
- Pharmacist interventions took place during the **pharmacist interview** at the beginning of the treatment.
- ✓ Other variables were: demographics, ECOG, type of tumor, OAA and concurrent medication. Severity of DRP was classified as: minor, moderate and serious.
- ✓ These data were **collected** from medical records and also directly from patients in the pharmacist interview.

#### **RESULTS**

- > 170 patients (mean age= 67.3 years old, 64.7% male, 7.9% with ECOG≥ 1) were included.
- The most prevalent tumors: Prostate cancer (18.8%), renal cancer (17.0%), liver cancer (12.4%) and multiple myeloma (11.2%).
- The most **prevalent OAA**: Sorafenib (11.8%), everolimus (10.6%), abiraterone (10.0%) and lenalidomide (9.4%).
- 84 pharmacist interventions were performed in 62 different patients (90.5% in oncological and 9.5% in hematological patients).





#### **OAA ASSOCIATED TO MORE DRUG RELATED PROBLEMS**

1.1
1.0
0.8
0.8
0.5
0.4
0.4

## **CONCLUSIONS**

- ✓ Pharmacist interventions and follow-up have achieved to detect DRP and improve the treatment of onco-hematological
- ✓ The most frequent interventions consisted on identifying drugs and herbs interactions and improving management of side effects.

