## A PHARMACEUTICAL CARE PROGRAM TO IMPROVE PAIN MANAGEMENT IN PATIENTS WITH ADVANCED PROSTATE CANCER

INTRODUCTION: Pain is a frequent symptom with many types of cancer. In 80-85% of patients with metastatic prostate cancer (MPC) the cancer spreads to the bone, which causes pain, pathologic fractures or spinal cord compression.

OBJECTIVES: To develop a pharmaceutical care program and to analyze the prevalence of pain in patients with metastatic prostate cancer who attend the Outpatient Area of the hospital pharmacy.

MATERIALS AND METHODS: A literature search in several databases was conducted (Pubmed, Medline and Google Scholar) for a review of pain in patients with MPC. We also consulted the websites of the National Cancer Institute and other cancer organizations. The Wisconsin Brief Pain Questionnaire was selected for characterizing the types and degree of pain that patients experienced. A diary to be distributed for patients to record their pain in terms of degree, duration, and analgesic treatment, and an educational pamphlet about oncologic pain that included advice on how to deal with the pain and better understand its symptomatology, were developed.

A follow-up of patients with MPC who began receiving treatment with abiraterone or enzalutamide from the hospital pharmacy from January to July, 2016 was performed. They filled out a questionnaire designed to evaluate the type of pain they were experiencing at their initial visit and at subsequent visits. They were given the diary and an informational pamphlet.

RESULTS: The program began with 38 patients, of whom 56% presented with bone metastases. From the questionnaires they completed at each visit, it was observed that 35% reported pain. The most common analysesic treatment used was NSAIDs (36%) or NSAIDs plus opioids (29%).

The materials patients received improved characterization of their pain and served as a psychological support, basically, through understanding that pain was a frequent symptom of their illness and one that could be treated more effectively.

CONCLUSIONS: A high prevalence of pain in patients with metastatic prostate cancer was identified which indicates that analysesic treatment is often inadequate. Creating pharmaceutical care programs may contribute to better pain evaluation and treatment, and to support for patients.