

Strategies to reduce the risk of infusion reactions to fosaprepitant in highly emetogenic chemotherapy

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OBJECTIVE

Evaluate the incidence of infusion site reactions (IFR) related to fosaprepitant.

Asses the effectiveness of preventive measures to mitigate this risk.

MATERIALS AND METHODS

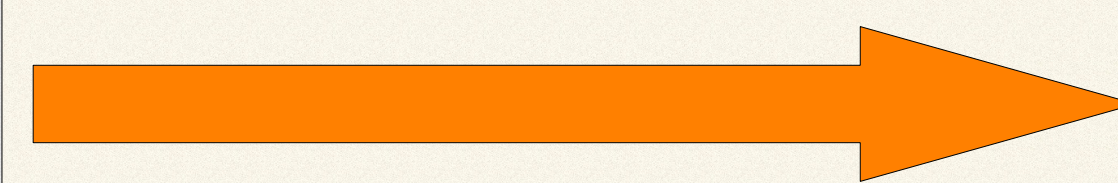
Retrospective analysis.

Data: from dec-2023 to sept-2024. Collected in FarmisOncofarm® and conducted with SPSS® 20.

Before

Fosaprepitant 150mg + dexamethasone 10mg + ondansetron 8mg in 100mL of 0.9% of sodium chloride. Administration: 20'.

Intervention



After

Fosaprepitant 150mg + dexamethasone 10mg + ondansetron 8mg in 250mL of 0.9% of sodium chloride. Administration: 30' Training to healthcare staff and patients

RESULTS

Overall incidence of IFR: 1,30% (20/1537 infusions).

Patient incidence: 4,16% (15/361 patients).

Before

IFR: 4,3% (13/301 infusions).

Intervention



After

IFR: 0,56% (7/1236 infusions).

Relative risk (RR) = 0,13 (95%CI 0.05-0.33, p<0.05).

CONCLUSIONS

Proper dilution, extended infusion times, rate monitoring and staff education reduced IFR significantly.

Multidisciplinary approach + continous education optimize the management of nausea and vomiting while minimizing treatment-related risks.

