

Oral anticancer agents: a prospective pilot study of patient educational surgery by a pharmacist and a nurse

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Background

There has been a remarkable growth of approved oral anticancer agents (OAA) in the last years. This situation involves the pharmacist as a key part of the interdisciplinary team assuring the safety and an adequate knowledge of the treatment with OAA. This may enhance compliance and reduce adverse events. A patient educational surgery was established by a team of a pharmacist and a nurse (PESPN).

Purpose

- To describe the first patients of PESPN.
- To compare the number of calls received by the continuing oncology care unit (COCU) before and after the establishment of PESPN.

Material and Methods

Prospective observational study from 2010 to present in a tertiary hospital. We included all patients initiating OAA. The information tools employed were validated specific leaflets of each drug, others leaflets related to symptoms management and personalized treatment calendars. Furthermore, we checked potential interactions between OAA and other concomitant medication.

Data collected: demographics, family support, IK (Karnofsky index), comorbidities, disease, staging, treatment type, information support, concomitant medications, interactions prevented, number of phone-calls received to the COCU.

Results

34 patients

Variable	Patients N(%)
Women	20(60.6%)
Age (mean ± SD)	66.5±15.2
Family support	28(84.8%)
IK 90-100%	28(84.8%)
Comorbidities	20(60.6%)

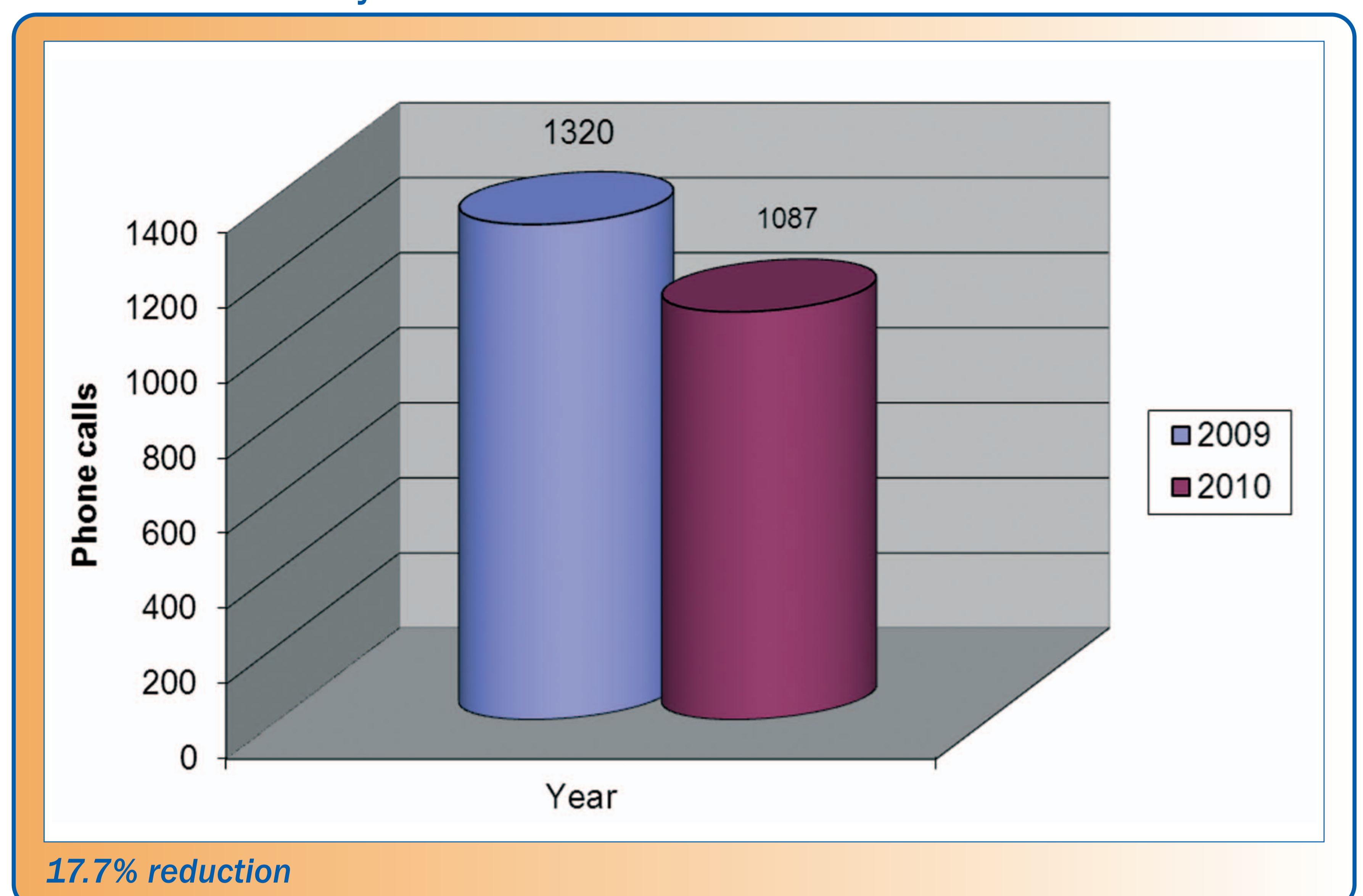
Oral anticancer agent

Variable	Patients N(%)
Vinorelbine	11(33.3%)
Capecitabine	8(24.2%)
Temozolomide	8(24.2%)
Topotecan	3(9.1%)
Erlotinib	2(6.1%)
Gefitinib	1(3.0%)
Treatment type	
*Metastatic	23(69.7%)
*Adjuvant	10(30.3%)
Indication	
Progression by imaging	15(45.5%)
First-line treatment	13(39.4%)
Biochemical progression	3(9.1%)
Patient preference	2(6.1%)
Pathological progression	1(3.0%)
Information tools to help education	
OAA leaflets	31(93.9%)
Personalised calendar	4(12.1%)
Others	3(9.1%)

Cancer disease

Variable	Patients N(%)
Breast	14(42.4%)
Lung	9(27.2%)
CNS	8(24.2%)
Colon	2(6.1%)
Stage	
StageIV	32(97.0%)

Phone-calls received by COCU



Medication related problems

Variable	Patients N(%)
Concomitant medications	32(97.0%) (mean 3.8)
Alternative medicine	2(6.1%)
Total interactions	6(18.2%)
*erlotinib-omeprazole	3(9.1%)
*erlotinib-acenocoumarol	1(3.0%)
*capecitabine-acenocoumarol	1(3.0%)
*valproic-temozolomide	1(3.0%)

Conclusions

The patient profile was a metastatic breast cancer woman initiating OAA after imaging progression. The treatment most dispensed was vinorelbine and the patient received specific information leaflets of the OAA.

Almost all patients were on concomitant medication and potential interactions were prevented. There was a significant reduction in the number of telephone inquiries received by COCU.