

TOXICITY IN ONCOLOGY: AN ANALYSIS

21st Congress of the EAHP Vienna, Austria 16-18 March 2016

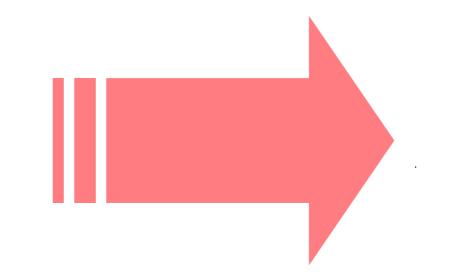
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DI-036

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Drugs in onco-haematology:

- physicians often consider toxicity acceptable
- focus on the outcome
- patients are provided with tools to deal with unavoidable side effects



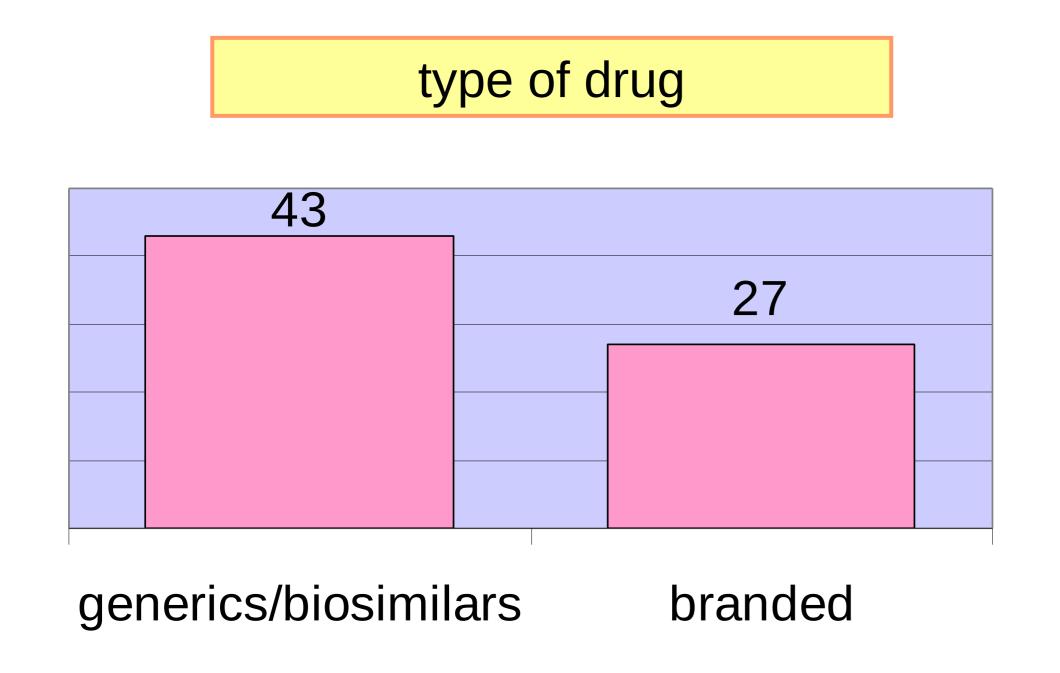
The threshold of evaluation of adverse drug reactions (ADR) is different from other areas and many adverse effects are so predictable that are not even considered.

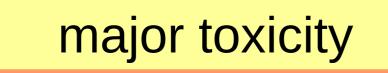
PURPOSE

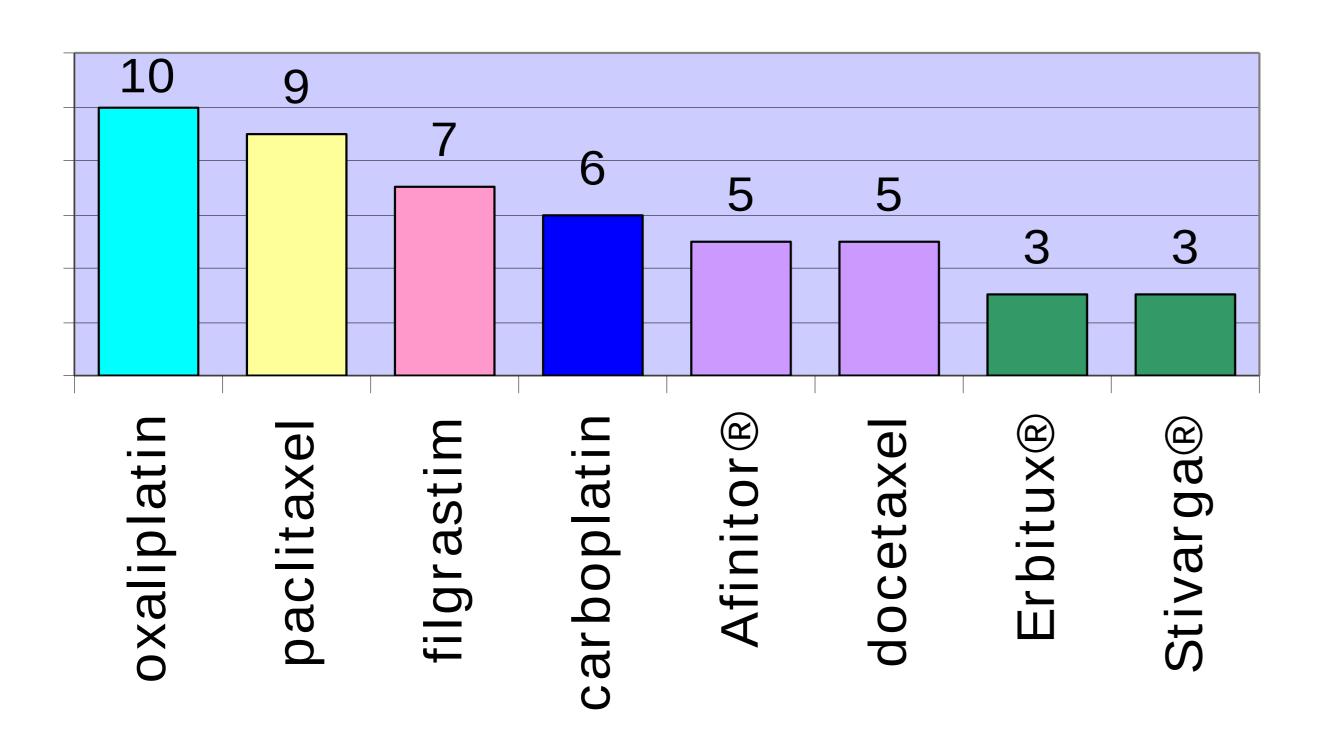
- to record the toxicity reported in our hospital for patients receiving cancer treatment
- to perform a quantitative evaluation
- to estimate the culture of pharmacovigilance in this field

RESULTS

- 67 ADRs
- 74% involved injectable drugs
- 1 ADR was caused by a medication error and 1 involved an off-label use
- all ADRs were known and reported in drug leaflets
- most adverse reactions occurred during drug administration or the following days







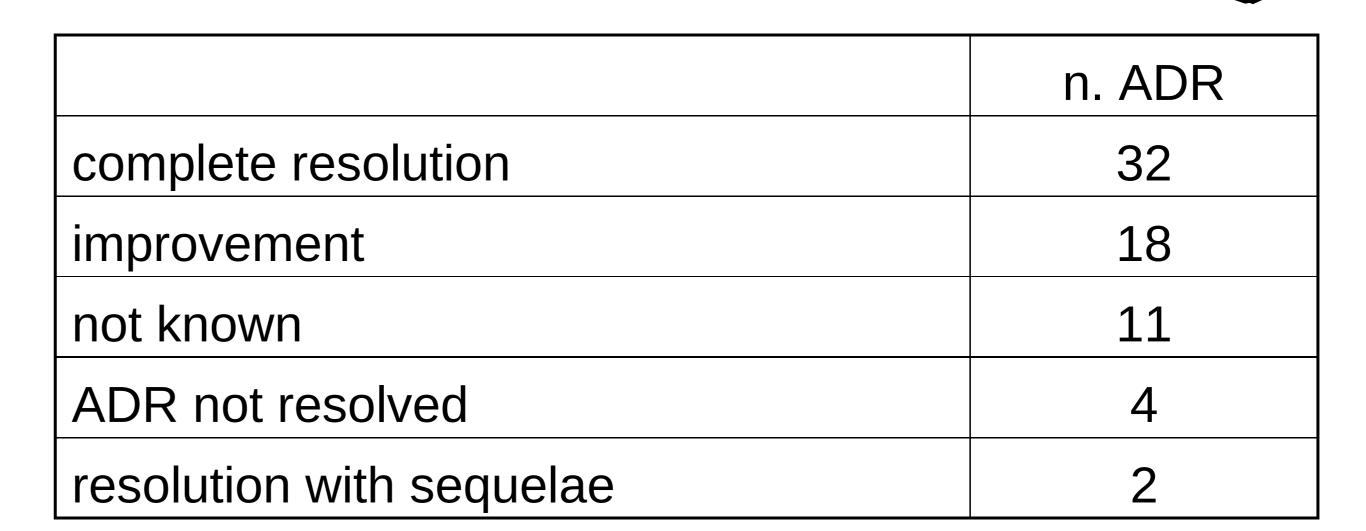
MATERIAL AND METHODS

We analysed ADR reports included in the National Network of Pharmacovigilance in 2014 and then sorted the ADR reports by category: antineoplastic agents and immunomodulators.

We identified:

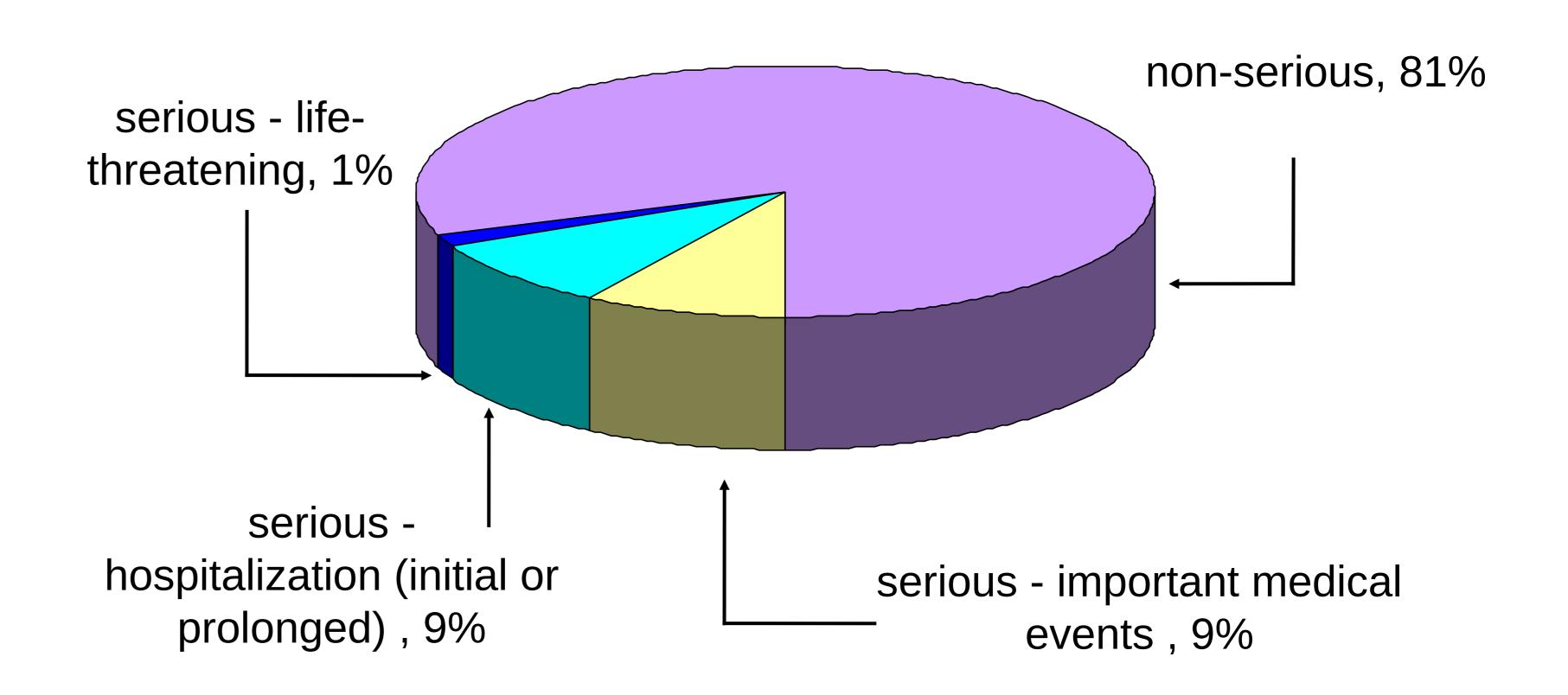
- the type of drug
- active ingredients most reported
- seriousness of the symptoms experienced
- their resolution

resolution



seriousness

There were no drug related deaths.



Data collected showed ADR reporting related to injectable drugs and generics/biosimilars.

ADRs were mostly not serious, did not become chronic and were known; we can therefore suspect an important phenomenon of under reporting.

In onco-haematology there have been many new drugs launched on the market (many oral), and for many of them the safety profile needs to be further evaluated: pharmacovigilance is an important resource.

The pharmacist has a key role in raising awareness of the problem, but also in encouraging appropriate reporting.