

EFFECT OF PHARMACEUTICAL FOLLOW-UP IN PATIENTS WITH SECONDARY HYPERPARATHYROIDISM TREATED WITH CINACALCET

Fernández Pérez A, Cachafeiro Pin AI, López Rodríguez I, Rodríguez Losada I, López García VM
Universitary Hospital Lucus Augusti, Pharmacy Service, Lugo, Spain

BACKGROUND

Adherence in patients with secondary hyperparathyroidism (sHPT) to serious kidney disease treated with cinacalcet is very important for their health status.

PURPOSE

To assess the adherence (percentage of days of treatment covered with medication with regard to the total days) observed in patients treated with cinacalcet and to value the effect of the adherence reinforcement measures applied to patients when medication is dispensed in our Pharmacy Service (PS).

METHODS

Observational descriptive study (January, 2012) of all patients treated with cinacalcet and selection of those with record of lack of adherence. Tools: medical history, dispensing medication record. To reinforce the adherence the PS elaborated a brochure with recommendations, delivered pillboxes and elaborated a patients' delay record to report to the medical doctor (MD). The results of adherence reinforcement were registered in April, 2012.



RESULTS

From 66 patients treated with cinacalcet, we selected 13 (19,7 %) with at least record of 3 delays, 6 women and 7 men with a mean age of 65,3:

- ❖ Posology: 120 mg/24h 7,7 % (1), 90 mg/24h 15,4 % (2), 60 mg/24h 23 % (3), 30 mg/24h 38,5 % (5), 30 mg/48h 7,7 % (1) and 30 mg/72h 7,7 % (1).
- ❖ The delay was between 4 and 70 days (15,5 of average).
- ❖ After adherence reinforcement measures, 6 patients gathered their medication punctually in the following dispensation.
- ❖ After the second intervention, only 1 of the not adherent patients came in date.
- ❖ All delays were communicated to the medical doctor.

CONCLUSIONS

- Although the doses are simple and the adherence support strategies applied are theoretically adequate, the results aren't satisfactory.
- It would be necessary to inform the patients adequately about the repercussions of a bad adherence and to do a suitable follow-up elaborating a strategy combined between the PS and the MD.