



# MULTIDISCIPLINARY CAR-T TEAM



## What was done?

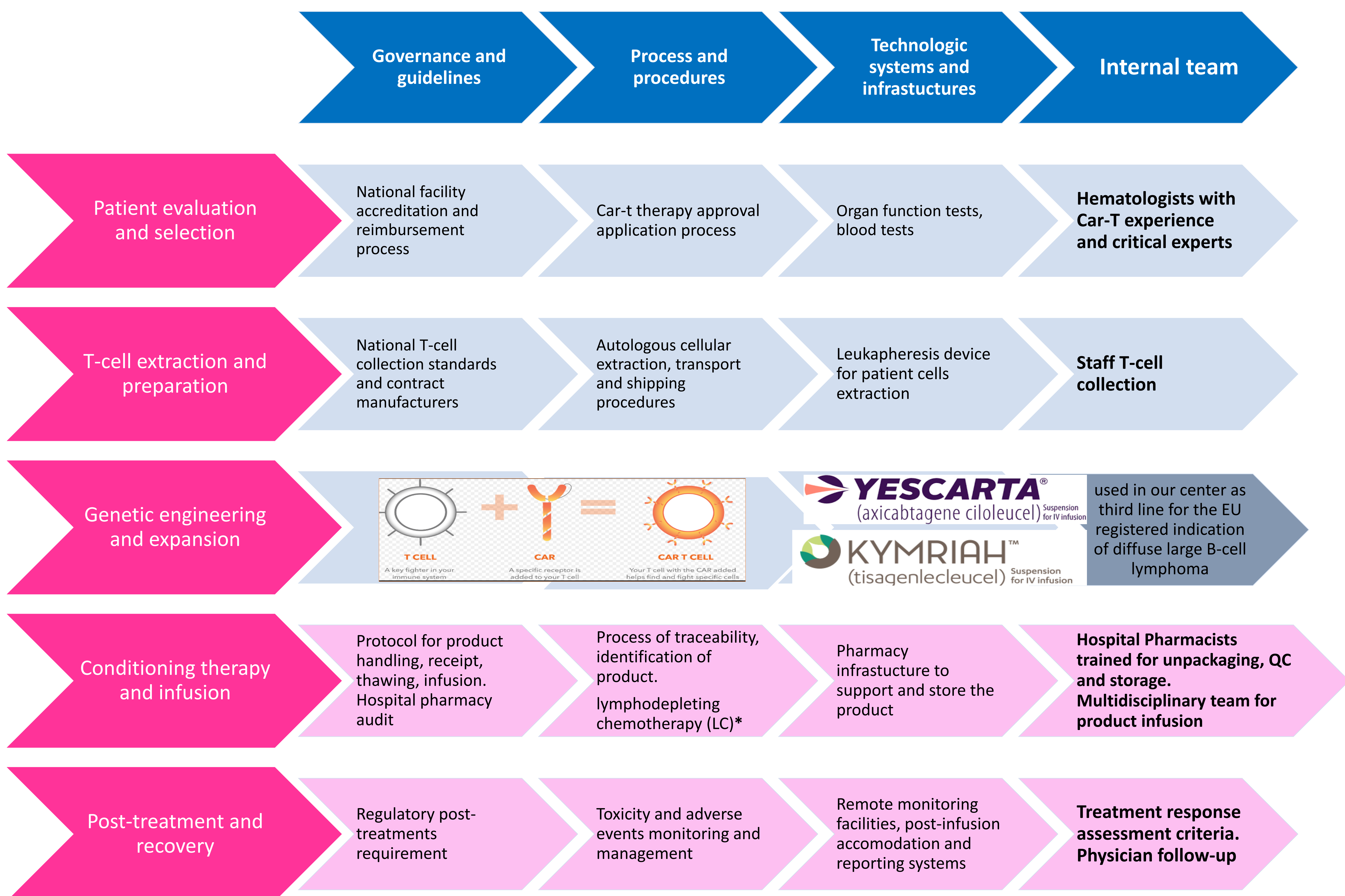
A multidisciplinary team (CAR-T team) was constituted for the management of CAR-T therapies (Chimeric Antigen Receptor T). The pharmacist was included in the team for the planning and organizational phase of the process.

## Why was it done?

CAR-T cell therapies are a new advanced type of personalized immunotherapy against cancer. CAR-T therapies production and administration process consist of multiple stages: considering the complexity of the procedure and the observance of specific schedules, these therapies should be administered in highly specialised centers complying with specific organizational requirements, with disposal of an adequate multidisciplinary team.

## How was it done?

The pharmacist is responsible for the approval of the physician's prescription, the Lymphodepleting Chemotherapy (LC) preparation according to Good Manufacturing Practice (GMP), the LC distribution on scheduled time, the making available of treatments for supporting patient until CAR-T infusion and treatments after infusion for management of adverse events. At the arrival of CAR-T product, the pharmacist is responsible for the check and release in good conditions.



\* The LC protocols foresee the administration of cyclophosphamide and fludarabine on the 5th, 4th and 3rd day before the CAR-T infusion, and are defined on the base of the summary-of-product-characteristics. The medications are provided locally and refunded by national health system.

## What has been achieved?

In our center 12 patients were treated with axicabtagene ciloleucel (8 with compassionate use and then 4 with commercial use). The pharmacists presence in the multidisciplinary team was advantageous because, through validation of the therapies and verification of dosages, they guarantee further security to the patients. The high-tech automated centralization and computerization of chemotherapies ensured quality and safety of the preparations.

## What next?

The realization of defined paths and codified proceedings, the respect of fundamental timings for the success of the process and the chemotherapy preparation centralization could lead to increased investment, decisive for obtaining a high quality product and process level. The experience, now limited to hematology, could be used for future CAR-T applications.

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