4CPS-028

ANALYSIS OF INTERACTIONS DETECTED IN THE CONCOMITANT USE OF ANTINEOPLASTIC AGENTS AND PHYTOTHERAPY IN ONCO-HEMATOLOGY PRACTICE AND INTERVENTIONS CARRIED OUT

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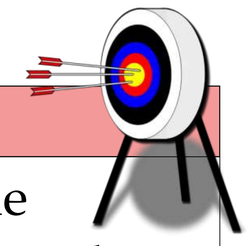
Background and importance

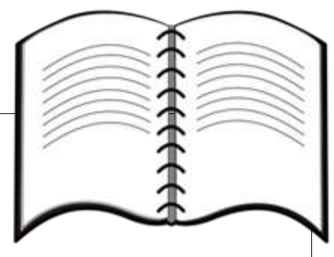
The use of phytotherapy is very widespread. Oncohaematological patients are particularly at risk of drug or phytotherapeutic interactions that may compromise the efficacy and safety of chemotherapy treatment.

Aim and objectives



Detect patients who consume phytotherapeutic products as well as their interactions with anticancer agents in oncohematological patients and to provide pharmaceutical interventions to optimise treatment.

Material and methods



Prospective observational study of oncohematology patients in a tertiary hospital

From January 2023 to August 2023.

Demographic variables(age, sex, pathology) were collected.

Interactions were detected using the applications Drugs®, Lexicomp® and About Herb®.

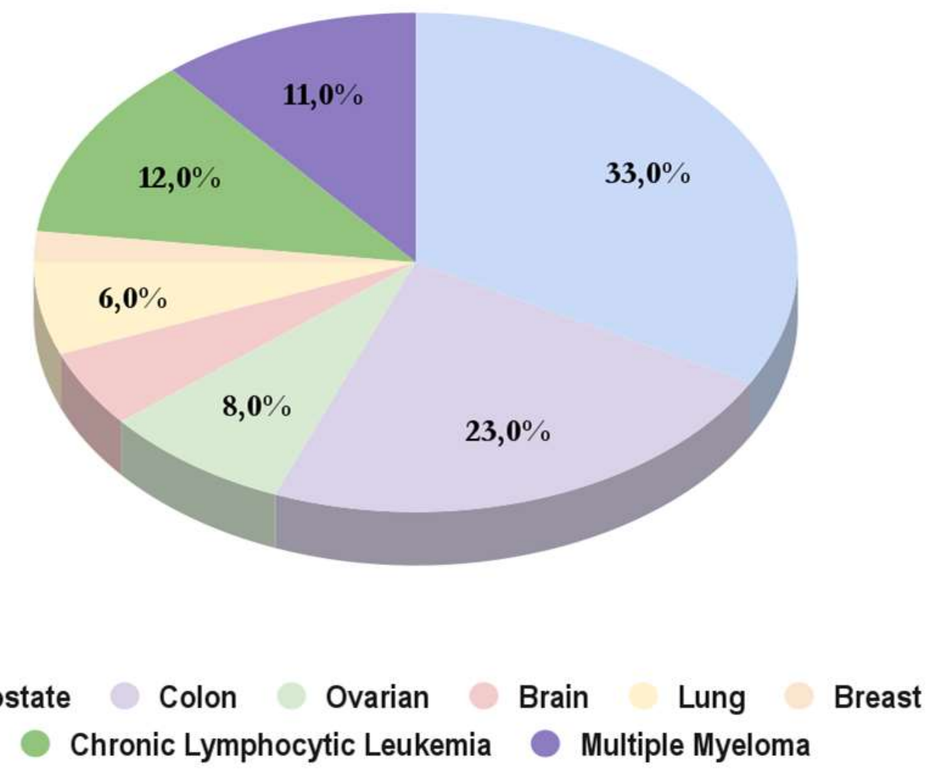
Results

63 patients were found to be taking herbal medicine concomitantly with oncohaematological treatment.

Median age: 62 [61.5-65.4] years. 57% women.

The patients belonged to two clinical services:

- 39.6% to Hematology
- 60.4% to Oncology.



Potential consequences.

- Increase or a decrease in the concentration of the anticancer agents (82%)
- Increase in the risk of bleeding (13%)
- Hepatotoxicity (3%)
- Hypokalemia (2%).

The consumption of phytotherapy was unknown by a health professional for 48% of the patients.

95% of pharmaceutical interventions were accepted and prevented errors of medication in patients.

Main supplements with a potential risk of interactions	
Echinacea	38%
Magnesium	31%
Green tea	20%
Soy	5%
Capsaicin	4%
Ashwagandha	1%
Devil`s claw	1%

Conclusions and relevance

The risk of interactions between plants and anticancer is frequently observed in clinical practice and due to its increasing popularity, healthcare professionals need to be alert. Multidisciplinary teams working together can detect this problem and avoid loss of effectiveness or toxicity of chemotherapy treatment.