DEVELOPMENT OF PHARMACEUTICAL CARE TOOLS FOR PATIENTS DIAGNOSED WITH HEPATOCELLULAR CARCINOMA

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Introduction

The hepatocellular carcinoma (HCC) is the sixth most common type of cancer in the world, accounting for 700,000 deaths annually worldwide. The main risk factor for developing HCC is hepatitis cirrhosis, of any etiology. According to Barcelona Clinical Liver Cancer, the systemic therapy, used in patients in advanced stage of HCC are oral chemotherapy drugs such as sorafenib, lenvatinib (first line treatment) and regorafenib (second line treatment). The pharmaceutical care service is intended for patients, caregivers, and relatives, aiming for prevention and reduction of drug-related problems (DRP). Unfortunately, chemotherapy is frequently related to expected adverse events (EAE), drug interactions (DI) and DRP. These factors are significant on adherence and it influences negatively in patients' quality of life. Pharmaceutical care is a tool for the improvement of treatment and this service requires instruments to implement the pharmacotherapeutic follow-up (PF), to measure and to monitor patients' EAE, DI and DRP. The development of tools for this monitoring is the objective of this work.

Method

Descriptive study of PF forms developed for pharmaceutical care, focused on HCC patients, under treatment with sorafenib, lenvatinib and regorafenibe in a general hospital in Rio de Janeiro. The EAE monitoring tool was created using each treatment label. The adherence questionnaire was adapted from Kimura et al, 2015. The documents were elaborated using Therapeutic Outcomes Monitoring (TOM) method, in Microsoft Excel and Word, 2010.

Results / Discussion

Six formularies were developed and adapted to a digital format to make data compilation easier. The tool used for registering information collected from pharmaceutical consultation contains: patient's identification (name, medical record, birth date, age, date of the next appointment and phone number); sociodemographic data (gender, race and education); social assessment (habits such as smoking, alcohol and illicit drugs consumption); medicine (drug name, when treatment began and possible allergies to drugs or food); signs and symptoms related to the HCC diagnosis; comorbidities; information about the treatment and room for notes. The EAE monitoring forms were created for each treatment. The form contains information on the label classified as very common and common. There is also a field for EAE's occurrence date and notes. The adherence questionnaire developed by Kimura et al (2015) was used in the pharmaceutical care service, which aims to evaluate: patients' therapy adherence, their understanding of the disease's stage, their sense of trust in the healthcare professionals, patients' expectations and attitude towards the treatment. The TOM method requires the development of PF tools, because it is focused on pharmaceutical care of specific illnesses.

Conclusion

We hope that systematic data collection will support the stages of pharmacotherapeutic analysis, identification of DRP and action plans regarding patient care during cancer treatment and promoting patient's safety.

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