IMPROVED ACCESS TO CHEMOTHERAPEUTIC TREATMENT IN PATIENTS WITH MULTIPLE MYELOMA

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BACKGROUND
It is a hospital complex whose reference center is a tertiary hospital to which is attached a regional hospital located 75 km away. In 2018, in coordination with the pharmacy and hematology service it was decided to implement a monographic consultation for patient with multiple myeloma in the regional hospital, with the proposal to improve the accessibility of patients to chemotherapeutic treatments and avoid displacement to the center of reference.

OBJECTIVES.
- Describe the activity carried out within the scope of a program to improve accessibility for patients with multiple myeloma. Evaluate user satisfaction with this new feature.

METHODS.
Retrospective descriptive study conducted among April 2018 and September 2019. The following variables of the chemotherapies management program (Farmis-Oncofarm) were recognized: number of patients treated, number of chemotherapy cycles administered and type of chemotherapeutic scheme. To evaluate patient satisfaction, obtain 30 anonymous and voluntary evaluations in which you evaluate from 1 to 10 total satisfaction and satisfaction per item.

RESULTS.
- 46 patients were treated during the study period. 58% men and the average age of 62 years. A total of 527 chemotherapy cycles were administered. 60% were parenteral chemotherapy vs 40% oral chemotherapy.

- The overall satisfaction obtained by patientes was 9.4. The best rate items were the accessibility to the center, the proximity between the different units (hematology consultation, pharmacy and oncology day hospital) and the low waiting time.

CONCLUSIONS AND RELEVANCE
The implemented program has been highly valued by patients. Seeking strategies aimed at improving the accessibility of patients to hospital treatments should be a priority for the health system. In our case it is a pathology whose treatment requires frequent and repeated cycles of chemotherapy in fragile and elderly patients. This added to the ease of administration (subcutaneous and oral route) make multiple myeloma a candidate pathology to follow up in a regional hospital without jeopardizing patient safety.

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