NETUPITANT-PALONOSETRON IN BREAST CANCER: POTENTIAL DRUGS INTERACTIONS

E. TEJEDOR TEJADA¹, P. NIETO GUINDO¹, S. PORTILLO-HARÓ², C. CASTAÑO AMORES²
¹HOSPITAL TORRECÁRDENAS, PHARMACY, ALMERÍA, SPAIN.
²HOSPITAL SAN CECILIO, PHARMACY, ALMERÍA, SPAIN.

Background and importance

• Neurokinin-1 (NK1) receptor antagonists (RA), netupitant, are usually co-administered with serotonin (5-HT3) RA, palonosetron, to prevent chemotherapy-induced nausea/vomiting.

Aim and Objectives

To analyse potential drug interactions (PDI) between netupitant-palonosetron (NEPA) with breast cancer treatment.

MATERIALS AND METHODS

• Retrospective observational study
• Oncology treatment: epirrubicine and ciclofosfamide
• Antiemetics: Netupitant/Palonosetron
• Time study: January to August 2020 (8 months).

PDI were identified using micromedex®, uptodateintreactions®, medinteract® and Drug Interaction checker®

RESULTS

• 30 medicines were reviewed in 79 patients
• 48 patients (60.78%) were polymedicated
• Pharmacokinetic interaction was: CYP3A4 sustrates
• Pharmacodynamic interactions: QT syndrome and serotoninergic syndrome
• 61 PDI were founded in 40 patients (51.89%) which 10 were severe and 21 moderate.
• 8 (80%) severe PDI were accepted and moderate recommendations led to reduction dosage or concomitant use.

Conclusion and Relevance

• More than half of patients with NEPA has at least one PDI.
• Clinical pharmacists are essentials in detecting PDI, improving the safety and effectiveness of the oncological treatment.

References and/or acknowledgements


VIE21-0034
A04 Antiemetics and antinauseants
edutejedor91@gmail.com