DOSE ADJUSTMENT IN CANCER PATIENTS WITH RENAL OR HEPATIC IMPAIRMENT

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BACKGROUND
Treatment outcomes and tolerability are not easily predicted in cancer patients receiving chemotherapy, especially in those patients with renal or hepatic dysfunction, where dose modifications become necessary.

OBJECTIVE
To evaluate drug dose modifications made in cancer patients with any grade of renal and liver impairment receiving any type of antineoplastic treatment.

METHODS
Retrospective/observational study (March 2014-June 2014)
Adult cancer patients treated with antineoplastic

Data recorded:
- Age/gender
- Treatment/dose
- Tumor type
- Body surface
- Dose modification
- Liver/renal function

A review of several dose modification protocols was made:
- Cancer Care Ontario
- UpToDate®
- EMA product information

N=370 patients
♂=51.6% Age = 65.2 years

<table>
<thead>
<tr>
<th>% Patients</th>
<th>Liver impairment only</th>
<th>Renal impairment only</th>
<th>Both</th>
<th>Total</th>
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<tr>
<td>19%</td>
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<td>12.5%</td>
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According to recommendations:
- Dose was modified in 53.7% of the cases that needed dose modifications
- Dosing recommendation protocols were followed in just 38.8%
- Protocol-guided dose modifications rate of antineoplastic therapy in renal/hepatic impairment was low.
- A dose modification protocol, based on guidelines, should be implemented in all units administering antineoplastic treatment.
- Other considerations apart from laboratory tests, such as tolerability and tumor response, should be taken into account.

CONCLUSIONS

Conflict of interest: Nothing to disclose

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