EVALUATION OF POST-CHEMOTHERAPY TOXICITIES IN CANCER PATIENTS WHO ATTENDED THE EMERGENCY SERVICE

Fernández Alonso E1, Rodrigo Cáceres A2, Callejo Pérez A2, Alcácer López MA1, Sagredo Samanes MA1, Trueba Insa S3, Merchante Andreu M1, Puértolas Tena I1, Gimeno Gracia M1, Compaired Turlán V1

1 Pharmacy, Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain.
2 Medical Oncology, Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain.
3 Emergency, Hospital Clínico Universitario Lozano Blesa, Zaragoza, Spain

BACKGROUND

- Cancer patients are characterized by a high frequency of attendance at the emergency services and specialized care is required due to complications from chemotherapy treatments.
- Patients must be educated about what to expect from their regimen and the correct use of supportive care medications.

PURPOSE

To identify, quantify and analyze the reasons why cancer patients come to the emergency service, and to evaluate the toxicities related to chemotherapy.

MATERIALS AND METHODS

Observational and retrospective study, including patients attended in emergency during 2014 and require the assistance of the oncologist.

Data Analyzed

- Age, sex, stage, histology, hospitalization required
- Mean duration of the hospitalization
- Time between last cycle and day attended in emergency

Reasons were grouped into 3 types:

- Tumor cause
- Chemotherapy toxicity
- Others

Data were collected from PCH® emergency program, Farmatools® and clinical documentation.

RESULTS

238 emergency events → in 158 patients

58.2% (92) men, mean age was 65 ± 12.3
77.8% (123) in stage IV
50.8% (121) required hospitalization

The mean duration of hospitalization was 11.4 days.

47 hematological disorders (15 with grade IV anemia and 9 with grade IV neutropenia)
34 Gastrointestinal disorders
7 Neurological disorders

The mean number of days between the last chemotherapy cycle and the day attended in emergency service was 8.2

CONCLUSIONS

- Main reason why cancer patients come to emergency is the tumor process itself, followed by post-chemotherapy toxicities in 36.9% of events (mainly hematologic and gastrointestinal).
- Pharmacists can educate patients about adverse effects of chemotherapy to manage them.
- Would be interesting to develop models to predict the risk of post-chemotherapy toxicities in order to reduce them (and hospitalizations).