

# Improving ponatinib therapy persistence through nurse-led specialty pharmacy outreach program

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## Background

Ponatinib is a kinase inhibitor indicated for the treatment of adult patients with newly diagnosed Philadelphia Chromosome Positive Acute Lymphoblastic Leukemia (Ph+ ALL) in combination with chemotherapy, as monotherapy in Ph+ ALL for whom no other kinase inhibitors are indicated T315I-positive Ph+ ALL, Chronic Myeloid Leukemia (CML) Chronic Phase (CP) with resistance or intolerance to at least two prior kinase inhibitors, Accelerated Phase (AP) or Blast Phase (BP) CML for whom no other kinase inhibitors are indicated and for T315I-positive CML (CP, AP, or BP) [1]. It is imperative that patients and their caregivers are thoroughly educated on the treatment, likely results, frequent side effects, adhering to therapy, and potential rare, but significant toxicities [2,3]. As specialty pharmacy (SP) fulfillment becomes more widespread in oncology, understanding best practices to enhance medication adherence and persistence is essential in this setting.

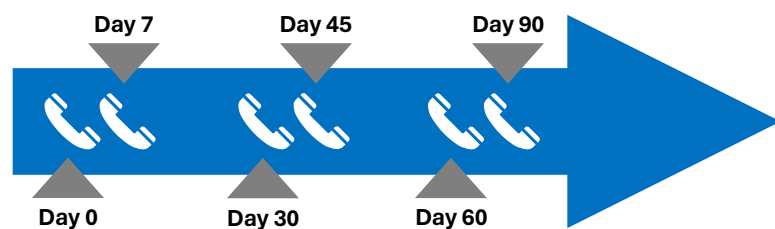
## Objective

To assess the impact of nurse-led SP counseling on ponatinib persistence.

## Methods

This retrospective analysis of ponatinib persistence from AcariaHealth SP database included patients initiating ponatinib between 5/19/23 and 2/15/24. Patients received a nurse-led counseling call prior to receiving the first dispense to review diagnosis, regimen, place in therapy, side effects, side effect management, and baseline risk of non-adherence secondary to financial concerns. Patients also had the opportunity to receive a counseling call around days 7, 30, 45, 60, and anytime they were overdue for refill. This analysis evaluated persistence by comparing the proportion of patients remaining on therapy at days 30 and 90 between those who accepted counseling and those who declined or were unreachable.

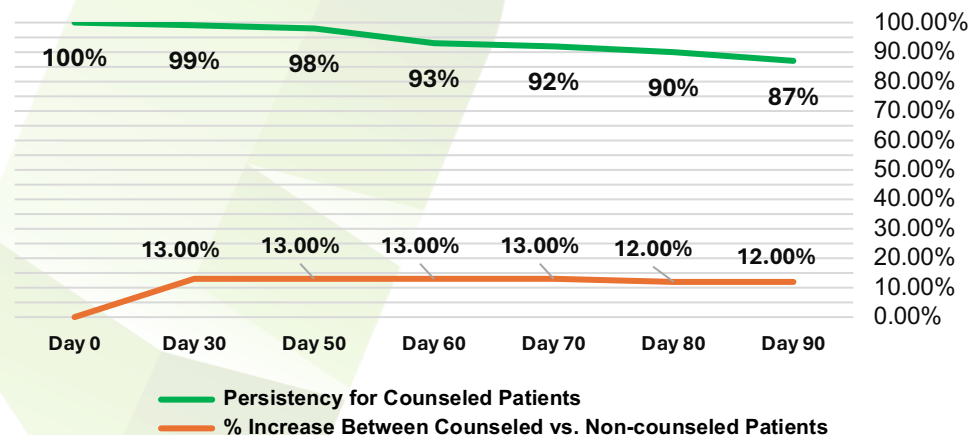
### Nurse-led Counseling Call Timeline



## Results

The analysis included 463 patients, 75% of whom received counseling. Among counseled patients, 99% remained on therapy at day 30, and 87% remained on therapy at day 90. Patients who received counseling were 2.25 times more likely to refill at day 30 and 2.29 times more likely to refill at day 90 compared to those who did not accept counseling or were unreachable.

### Persistency Curve for Counseled Patients



## Conclusion

Incorporating SP clinical programs is an effective strategy to improve patient persistence after ponatinib initiation. The high acceptance rate of counseling indicates patients' recognition of the benefits of clinician counseling. Further research is needed to assess the impact of these interventions on clinical outcomes.

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### References:

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- [3] Cuellar S, Vozniak M, Rhodes J, Forcello N, Olszta D. BCR ABL1 tyrosine kinase inhibitors for the treatment of chronic myeloid leukemia. J Oncol Pharm Pract. 2017;1078155217710553.