

Background

- Management of patients with cancer requires collaboration among a patient-centered care team often including specialty pharmacists
- Health system specialty pharmacists are uniquely positioned to provide safe and effective medication management for oncology patients
- The diverse types of solid tumor and hematologic malignancies covered by specialty pharmacists leads to considerable variation in patient management with often unique pharmacist activities
- Defining and classifying pharmacist activities has historically been challenging, particularly in the care of patients with cancer
- More detailed classification of clinical activities performed by oncology specialty pharmacists may lead to a better understanding of their role on the care team as well as more concise documentation of interventions that lead to better patient outcomes¹

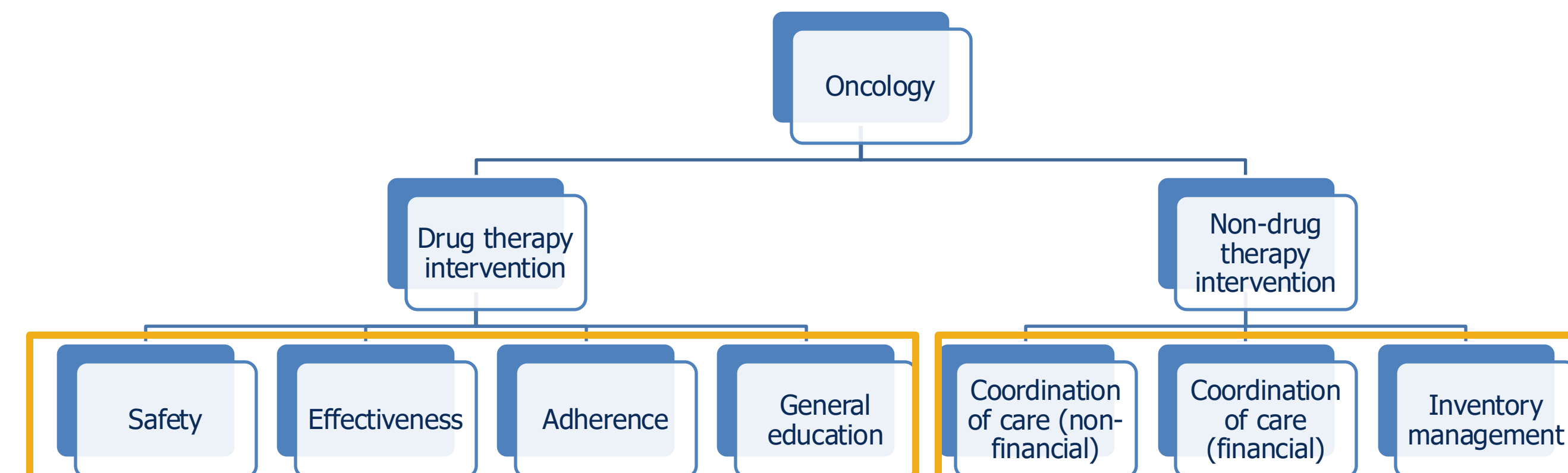
Objectives

- Primary objective**
 - Classify types of clinical activities performed by specialty pharmacists caring for patients with cancer
- Secondary objective**
 - Quantify pharmacist time spent on clinical activities performed by specialty pharmacists

Methods

- Retrospective review of clinical activities completed by specialty pharmacists caring for patients with cancer at West Virginia University Medicine Specialty Pharmacy
- Data was collected from activities recorded by specialty pharmacists in Therigy STM™ between Jan. 1, 2024 and June 28, 2024

Inclusion criteria
<ul style="list-style-type: none"> Patients enrolled in the patient management program in the therapeutic category "oncology" with one recorded clinical activity Therigy STM™ between Jan. 1, 2024 and June 28, 2024 Recorded clinical activities must have one or more classifications or "reasons" for intervention
Exclusion criteria
<ul style="list-style-type: none"> Any patient not enrolled in the patient management program (PMP) Any clinical activity missing a reason classification or reason for activity Any patient with a clinical activity missing classification or "reason" for intervention



Results

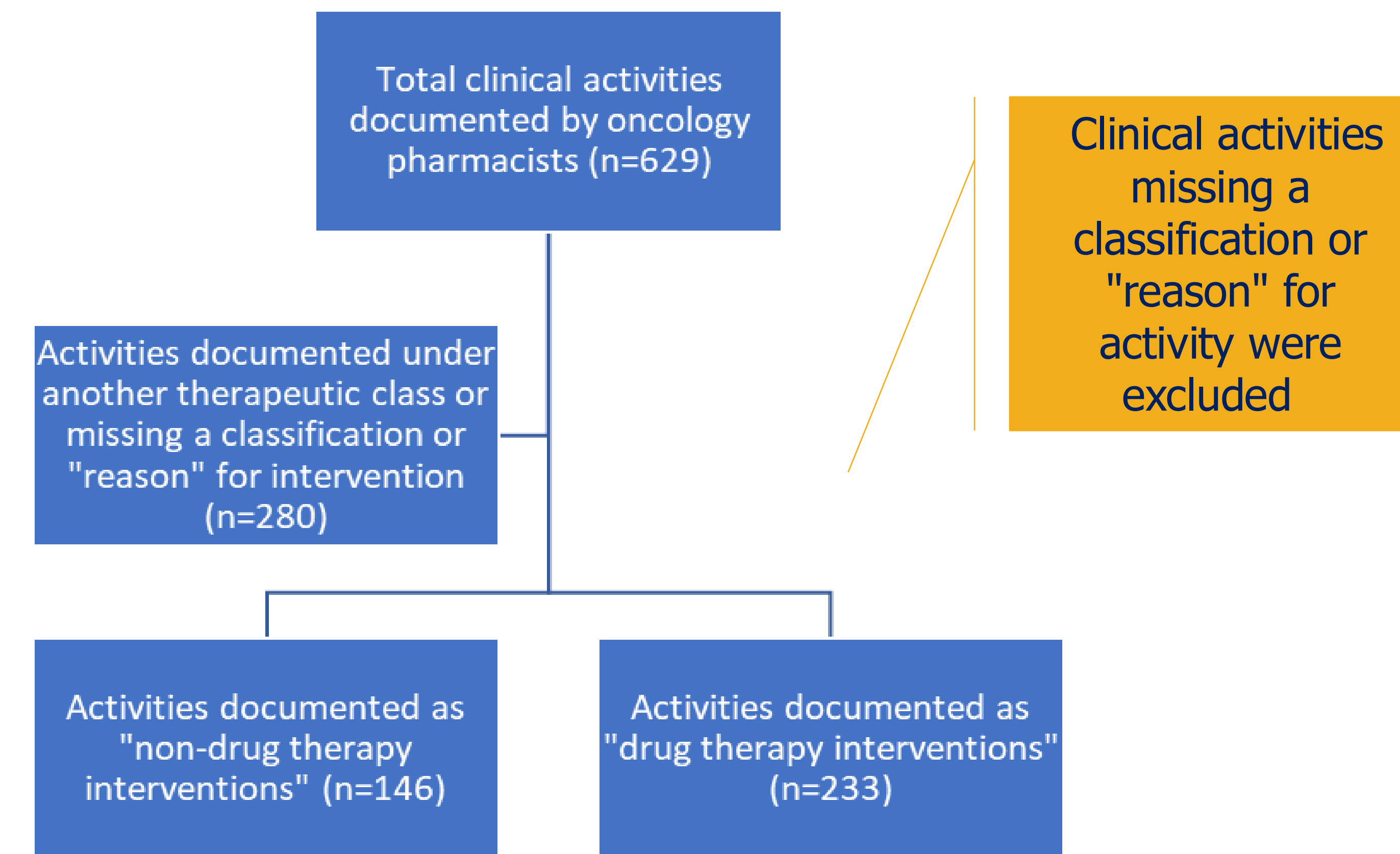


Chart 1: Clinical activities performed from January 1, 2024 through June 28, 2024

Drug therapy interventions*			
Safety	Effectiveness	Adherence	General education
131	13	60	29
<ul style="list-style-type: none"> Side effect, adverse event, toxicity management Drug-drug interaction Abnormal lab reviews Medication dose or frequency change Hold Improper drug Symptom management Missing prescription information Medication stability 			

Safety was the most frequently documented drug therapy intervention

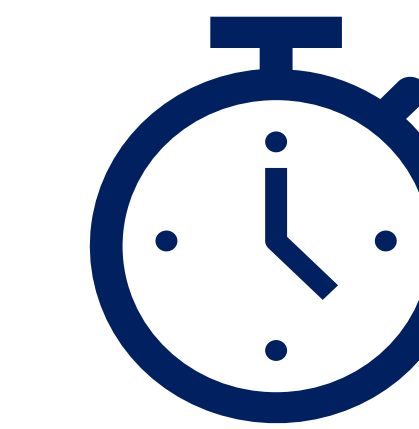
Table 1: Classification of clinical activities documented under "drug therapy intervention"
*Activities may contain multiple interventions with subsequent multiple classifications

Non-drug therapy interventions*		
Coordination of care (non-financial)	Coordination of care (financial)	Inventory management
130	16	0
<ul style="list-style-type: none"> Updated medication list Instructed to contact clinic Doctor outreach Discharge Condition concern of patient ED/hospitalization or Urgent care visit Follow up appointment Immunization Patient deceased 		

Non-financial coordination of care was the most frequently documented non-drug therapy intervention

Table 2: Classification of clinical activities documented under "non-drug therapy intervention"
*Activities may contain multiple interventions with subsequent multiple classifications

Results



Therapeutic category	Self-reported time to complete activity in minutes	Median time spent per activity in minutes (range)
Oncology	7435	15 (1-157)

Top 5 medications with associated clinical activities		
Medication name	Clinical activities	Reported time spent on activity in minutes (mean)
capecitabine	91	1025 (11.3)
venetoclax	44	457 (10.4)
temozolomide	33	391 (11.8)
abemaciclib	31	476 (15.4)
abiraterone	29	394 (13.6)

Conclusions

- Specialty pharmacists caring for oncology patients completed 629 clinical activities between Jan. 1st, 2024 and June 28th, 2024
- 280 clinical activities were incompletely documented
- The most frequent reason documented for clinical interventions was safety (131) followed closely by non-financial coordination of care (130)
- Pharmacists spent a median of 15 minutes completing each clinical activity with a wide range of 1 to 157 minutes per activity
- The most frequently documented clinical activities were completed were for patients receiving capecitabine

Discussion

- Limitations of the study include being a single center retrospective study and that a significant portion of clinical activities (270) were excluded for incomplete documentation
- This study did not evaluate the median time reported to complete clinical activities in each category
- Future directions:
 - Evaluate time spent on each subclassification of intervention
 - Evaluate outcomes of interventions
 - Standardize documentation of intervention classifications

References

1. Patel MP, Barbour SY, Moorman MT. Value Assessment of Oncology Pharmacist Interventions. J Adv Pract Oncol. 2023 May;14(4):329-331. doi: 10.6004/jadpro.2023.14.4.7. Epub 2023 May 1. PMID: 37313275; PMCID: PMC10258854.