

# The Impact of Patient Characteristics and Social Drivers of Health Factors on Oral Oncolytic Adherence

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## Background

### Current Landscape of Oral Oncolytics

- 25-35% of all current oncolytics are designed for oral use
- Oral oncolytics are available to treat most cancer types<sup>1,2</sup>

Oral Medication vs. Traditional IV Medication	
Advantages	Challenges
Convenient	Financial cost
Patient autonomy	Less contact with treatment providers
Quality of life	Adherence

- The extent of adherence to oral oncolytics varies from 16 – 100%, depending on the cancer type, method used to measure nonadherence, and patient settings<sup>3</sup>

### Social Determinants of Health (SDOH) Factors are Known to Impact Medication Adherence

- SDOH are the non-medical factors that influence health outcome - conditions in which people are born, grown, work, live, and age<sup>4</sup>
- Multiple studies have shown that various SDOH factors are associated with medication adherence across multiple chronic conditions (e.g., diabetes, hypertension, asthma) and cancer<sup>3,5,6,7</sup>



## Objectives

- Part 1:** Identify patient characteristics and SDOH factors associated with secondary oral oncolytic nonadherence
- Part 2:** Assess what SDOH barriers and patient characteristics are associated with primary oral oncolytic nonadherence

## Part 1 Study Design

- Study Population:**
  - Adults 18+ who received at least 2 fills of an oral oncolytic between May 2022 and April 2023
  - Final cohort: N = 1,128 prescriptions, n = 979 patients
- Data Collected:**
  - Patient characteristics (pulled from electronic records)
    - Age, gender, race/ethnicity, marital status, occupation, language and if interpreter needed, insurance type, smoking history, body mass index (BMI), population density, median household income, geographic code
  - Proportion of days covered (PDC) =  $\left(\frac{\text{days covered in observation period}}{\text{number of days in observation period}}\right) \times 100$
- Analysis:**
  - Multivariable mixed-effect logistic regression

## Part 2 Study Design

- Study Population:**
  - Adults 18+ who were prescribed a new oral oncolytic between November 2023 and January 2024
  - Final cohort: N=340 patients who answered the SDOH assessment and N = 176 patients who did not answer the SDOH assessment
- Data Collected:**
  - Primary oral oncolytic nonadherence (if a new prescription has not been filled within 30 days)
  - Patient characteristics & additional SDOH assessment
- Analysis:**
  - Logistic regression

## Part 1

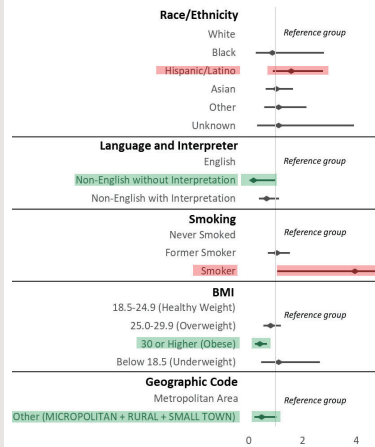
### Results:

**Table 1:** Multivariable mixed-effect logistic regression examining the associations between patient characteristics and oral oncolytic nonadherence

Characteristics	Nonadherence Rate (%)	Ref	Multivariable Mixed-Effect Logistic Regression		
			Odds Ratio	95% CI	P Value
<b>Age</b>					
Below 65	96 / 376 (26%)	Ref			
65 and Older	194 / 752 (26%)	0.93	0.56, 1.54	0.8	
<b>Gender</b>					
Female	149 / 575 (26%)	Ref			
Male	141 / 553 (25%)	1.01	0.71, 1.44	>0.9	
<b>Race/Ethnicity</b>					
White	133 / 531 (25%)	Ref			
Black	7 / 26 (27%)	0.88	0.27, 2.80	0.8	
Hispanic/Latino	52 / 189 (28%)	1.58	0.90, 2.77	0.11	
Asian	68 / 267 (25%)	1.03	0.64, 1.65	0.9	
Other	25 / 95 (26%)	1.12	0.59, 2.14	0.7	
Unknown	5 / 20 (25%)	1.11	0.32, 3.92	0.9	
<b>Marital Status</b>					
Married/Life Partner	187 / 750 (25%)	Ref			
Not Married/Life Partner	103 / 378 (27%)	1.08	0.75, 1.56	0.7	
<b>Occupation</b>					
Employed	51 / 188 (27%)	Ref			
Non-Employed	156 / 613 (25%)	0.92	0.55, 1.52	0.7	
Not Recorded	83 / 327 (25%)	0.98	0.57, 1.68	>0.9	
<b>Language and Interpreter</b>					
English	237 / 886 (27%)	Ref			
Non-English without Interpretation	2 / 23 (8.7%)	0.19	0.04, 1.00	0.050	
Non-English with Interpretation	51 / 219 (23%)	0.67	0.39, 1.13	0.13	

Characteristics	Nonadherence Rate (%)	Ref	Multivariable Mixed-Effect Logistic Regression		
			Odds Ratio	95% CI	P Value
<b>Insurance</b>					
Private	43 / 175 (25%)	Ref			
Medicaid	42 / 175 (24%)	0.94	0.48, 1.85	0.9	
Medicare	186 / 711 (26%)	1.21	0.65, 2.24	0.6	
Other	3 / 9 (33%)	1.32	0.22, 7.83	0.8	
Not Recorded	16 / 58 (28%)	1.28	0.55, 2.98	0.6	
<b>Smoking</b>					
Never Smoked	197 / 771 (26%)	Ref			
Former Smoker	85 / 336 (25%)	1.05	0.72, 1.53	0.8	
Smoker	8 / 17 (47%)	3.95	1.07, 14.6	0.040	
<b>BMI</b>					
18.5 - 24.9 (Healthy Weight)	126 / 444 (28%)	Ref			
25.0 - 29.9 (Overweight)	109 / 403 (27%)	0.81	0.55, 1.20	0.3	
30 or Higher (Obese)	42 / 234 (18%)	0.41	0.24, 0.69	<0.001	
Below 18.5 (Underweight)	12 / 42 (29%)	1.11	0.47, 2.65	0.8	
<b>Geographic Code</b>					
Metropolitan Area	276 / 1,049 (26%)	Ref			
Other (Micropolitan + Rural + Small Town)	14 / 79 (18%)	0.48	0.22, 1.04	0.062	
<b>Population Density</b>					
< 1,200	86 / 355 (24%)	Ref			
≥ 5,700	97 / 393 (25%)	0.89	0.56, 1.41	0.6	
1,200 - 5,700	105 / 372 (28%)	1.21	0.78, 1.89	0.4	
<b>Median Household Income</b>					
< 96,000	184 / 687 (27%)	Ref			
≥ 120,000	50 / 195 (26%)	0.76	0.47, 1.24	0.3	
96,000 - 120,000	54 / 238 (23%)	0.82	0.53, 1.28	0.4	

**Figure 2:** Forest plots of patient characteristics that showed significant or trending associations with oral oncolytic nonadherence



### Results:

- 73.75% of SHC specialty pharmacy patients were adherent to their oral oncolytic(s)
- Smokers had **3.95 higher odds** of nonadherence compared to nonsmokers
- Obese patients had **0.59 lower odds** of nonadherence compared to normal weight patients

### Trends:

- Patients who identified as **Hispanic/Latino trend towards having higher odds of nonadherence** when compared to patients who identified as white
- Patients who live within a **micropolitan, rural, or small town had a strong trend towards lower odds of nonadherence** compared to patients who lived in a metropolitan area
- Patients whose **primary language is not English and did not request an interpreter have lower odds of nonadherence** compared to patients who identified English as their primary language

## Part 2

### SDOH Assessment:

Patients were retrospectively contacted via phone and asked to participate by answering the following questions:

- In the past year, have you or any family members you live with been unable to get any **food, utilities, childcare, medicine, or any health care** (medical, dental, mental health, vision) when it was needed?
  - If the answer to 1 is yes, then list the element
- What **language** are you most comfortable speaking?
- How often do you feel confident about **reading and managing your prescription**?
- In the past 12 months, has lack of **reliable transportation** kept you from medical appointment, meetings, work, or from getting things needed for daily living?
- If required, do you have **access to assistance** from friends, family, or other individuals to manage your oral medication regimen?

**Table 2:** Logistic regression examining the association between patient characteristics and the presence of any SDOH barrier (Full table in supplemental information)

Characteristic	Odds Ratio	95% CI	P Value
<b>Age</b>			
Below 65	Ref		
65 and Older	0.82	0.38, 1.81	0.6
<b>Gender</b>			
Female	Ref		
Male	1.37	0.81, 2.32	0.2
<b>Race/Ethnicity</b>			
White	Ref		
Asian	0.62	0.33, 1.17	0.14
Hispanic/Latino	1.06	0.40, 2.89	>0.9
Other/Not Recorded	0.77	0.33, 1.85	0.6
<b>Marital Status</b>			
Married/Life Partner	Ref		
Not Married/Life Partner	0.99	0.57, 1.72	>0.9
<b>Occupation</b>			
Employed	Ref		
Non-Employed	1.22	0.60, 2.45	0.6
Not Recorded	0.94	0.48, 1.84	0.9
<b>Language</b>			
English	Ref		
Non-English	25.9	3.59, 581	0.007
<b>Interpreter Needed</b>			
Yes	Ref		
No	3.76	0.49, 80.3	0.3

**Table 3:** Logistic regression examining the association between SDOH barriers and primary medication adherence

SDOH Barrier	Overall Survey Responses			
	Adherence Rate		Unadjusted Association	
	n	%	OR	95% CI   P Value
No SDOH Barrier	109/135	80.74%	—	—
SDOH Barrier	70/78	89.74%	2.09	0.93, 5.17   0.089

**Table 4:** Logistic regression examining the association between specific SDOH barriers and primary medication adherence

SDOH Barrier	Adherence Rate				Unadjusted Association	
	n		%	OR	95% CI	P Value
	n	%	%	OR	95% CI	P Value
<b>Q1: Access to Goods and Services</b>						
No SDOH Barrier	18/23	78.26%	Ref			
SDOH Barrier	161/190	84.74%	1.54	0.48, 4.22	0.4	
<b>Q2: Language</b>						
No SDOH Barrier	42/49	85.71%	Ref			
SDOH Barrier	137/164	83.54%	0.85	0.32, 1.99	0.7	
<b>Q3: Health Literacy</b>						
No SDOH Barrier	57/74	77.03%	Ref			
SDOH Barrier	122/139	87.77%	2.14	1.02, 4.52	0.044	
<b>Q4: Transportation</b>						
No SDOH Barrier	24/25	96.00%	Ref			
SDOH Barrier	154/187	82.35%	0.19	0.01, 0.97	0.11	
<b>Q5: Support</b>						
No SDOH Barrier	46/57	80.70%	Ref			
SDOH Barrier	131/154	85.06%	1.36	0.60, 2.96	0.4	

### Results:

- Non-English primary language** was associated with an **almost 26 higher odds** of reporting an SDOH barrier
- Patients that identified **no SDOH barriers** had a strong trend of **2.09 higher odds** of primary medication adherence
- Patients that specifically identified **no SDOH barriers in health literacy** had a **2.14 higher odds** of primary medication adherence

## Conclusion

Medication adherence in oncology is critical for maximizing treatment effectiveness, controlling cancer progression, improving outcomes, managing side effects, reducing costs, and empowering patients throughout their cancer journey. A better understanding of the SDOH factors associated with medication adherence, such as smoking and health literacy, can better inform healthcare workers and identify points of intervention.

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## Supplemental Information and References (QR Code)

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