



## CASE REPORT

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*Developed & Funded by ESOP Education Committee*

### **Elder Patients Engagement and Adherence Diagnosed With Metastatic Renal Cell Carcinoma**

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#### **AUDIENCE:**

Oncology Pharmacists, Pharmacists, Pharmacy Technicians.

#### **GOAL:**

The goal of this activity is to reinforce and highlight common concepts, situations, and presentations that Oncology Pharmacists will encounter on a regular basis in order to provide supportive continuing education that illustrates real-world conditions and situations.

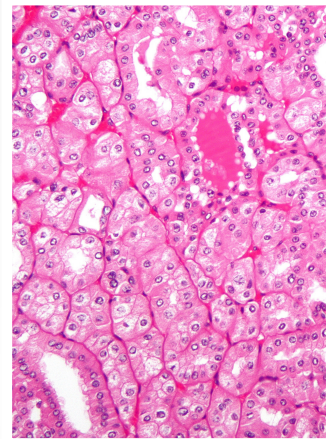
#### **TARGET BEHAVIOUR:**

Upon completion of this activity, participants will be able to have access to knowledge of the factors influencing adherence in cancer patients.

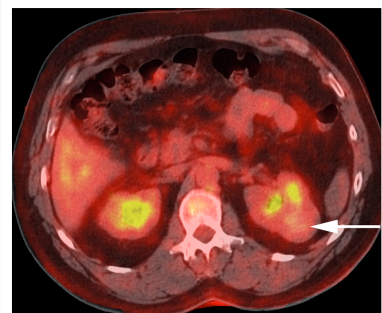
#### **STORY & INFORMATION:**

69 years old, Male patient diagnosed with stage VI mRCC. His left kidney with lymph node involvement and have lung metastasis. He is widowed and has one daughter who suffers from multiple sclerosis and lives 4 hours away. He has altered functional status, remains at home except for necessary trips and physician appointments. He also suffers from mild hearing impairment and requires glasses for reading.

He is also smoker and occasional beer drinker.



MRCC



PET CT SCAN

He has controlled diabetes. Diagnosed Depression and Hypercholesterolemia. He is still under treatment of;

for his diabetes,

- 1- Metformin ER 1000 mg ON (w/food)
- 2- Gliclazide 60 mg OM (w/food)

for Depression,

- 1- Citalopram 40mg OM

for Hypercholesterolemia,

- 1- Simvastatin 40mg ON

His doctor feels oral therapy would best suit him and recommended initiation of Pazopanib 800mg. OD following surgery.

After one week, he turned to hospital with unrelenting back pain. He sent to PED-CT scan again and doctors decided that his tumor progressed again. After a short interview with patient, Oncology Pharmacist understood that he didn't take his Pazopanib 800mg. pills.

### CONCLUSION&DISCUSSION:

Effective communication is critical. We must know the communication barriers deeply.

Patient related;

- Age
- Cognitive impairment
- Memory
- Psychiatric conditions
- Physical limitations
- Health beliefs
- Motivation

Disease related;

- Co-morbidities
- Poor prognosis
- Unknown tumour size
- Uncertainty
- Pain management



PAZOPANIB



ADHERENCE

Social & Economic related;

- Marital status
- Support network
- Health literacy and education
- Cultural and religious beliefs
- Cost

Therapy related;

- Regimen complexity
- Confusing regarding schedule
- Frequency of dosing
- Poly-pharmacy
- Failure to accommodate lifestyle
- Lack of coordination among health care team members
- Discontinuity in care

1. What are the adherence barriers in this case?
2. How could you and the health care team best address these challenges?
3. What strategies might be helpful to support his adherence?
4. What adherence challenges do you typically face with?
5. Which patient/therapy/disease-related factors do you find most difficult to manage?
6. How do you collaborate with other members of the hospital care team to improve your patient experience?

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Here are the steps for Effective Patient Adherence Communication:

1- Assess base line knowledge:

- What did your doctor tell you the medication was for?
- How id your doctor tell you to take the medication?
- What did the doctor tell you to expect in terms of side effects?
- What do you do if a dose is missed?

2- Educate:

- Keep directions simple on: why, when how to take it, where to store and what to expect.
- Give clear verbal and written instructions on drug regimen
- Design a regimen that fits within patient's lifestyle taking into account other medications

3- Ask:

- Ask patient to repeat instructions
- Involve patient's spouse, family member or care taker

4- Follow up:

- Adherence is a dynamic process and patient's must be re-assessed at every visit. As such follow up is key.