

My day with Oncology Pharmacy - Germany

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1. Introduction

In form of an ESOP survey in March and April 2022, professionals were asked about their working situation in preparation and/or delivering of read-to-use or oral cytotoxic drugs. All relevant daily working processes as activities in prescription and validation of cytotoxic drugs as also their clinical pharmaceutical support in patient care are addressed. Among new drugs of the past five years, according to the DAPI¹, were almost 30% (47) tumor therapeutics and more than half of them (28) are oral. This poster presents the country specific evaluation.

2. Material and method

The survey with 18 questions was translated into different languages and performed nationally using a web based application.

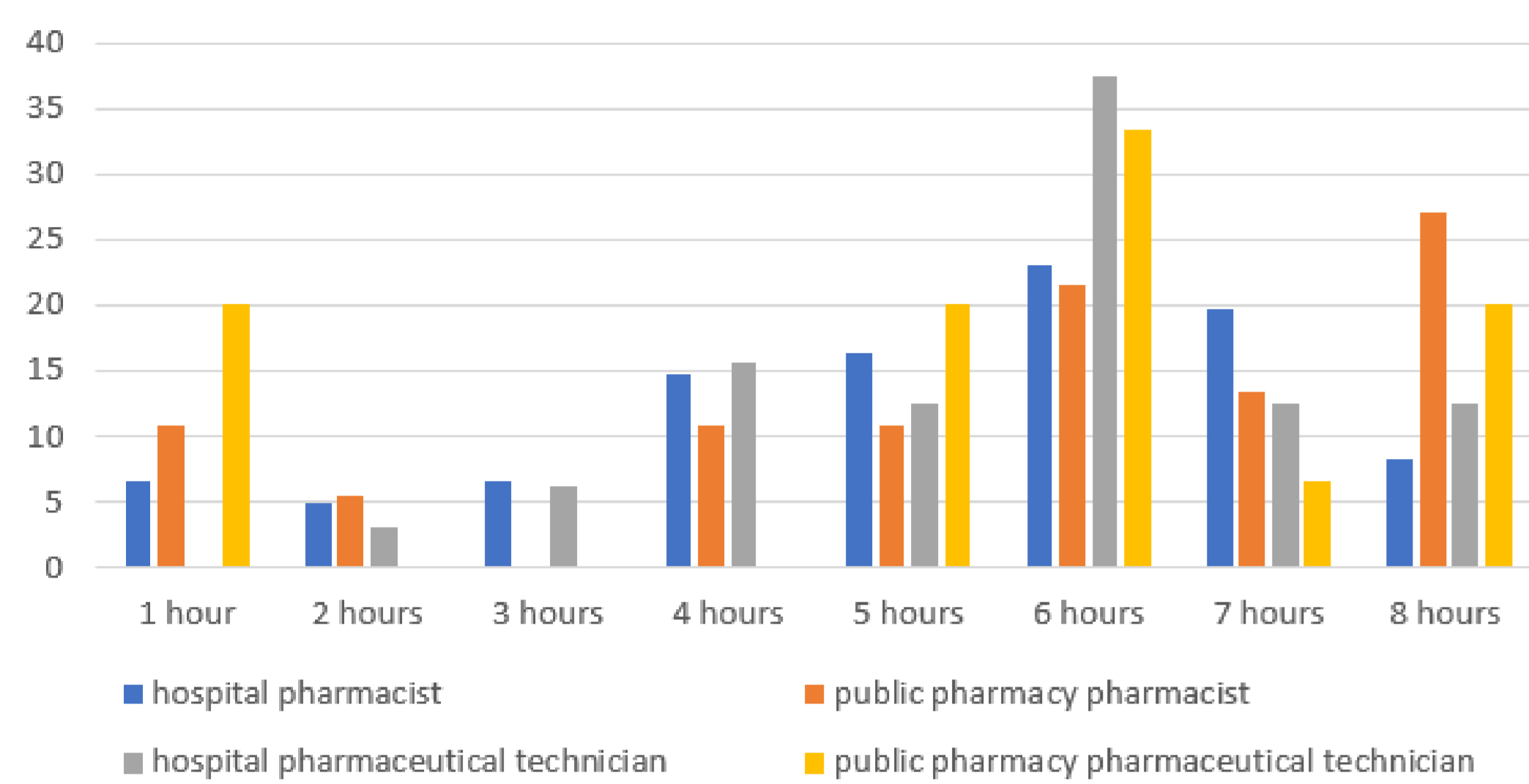


Fig.1: A total of 20% of our members who participated in the survey are predominantly involved in the manufacture, control and dispensing of cytostatics for more than 4 hours per day.

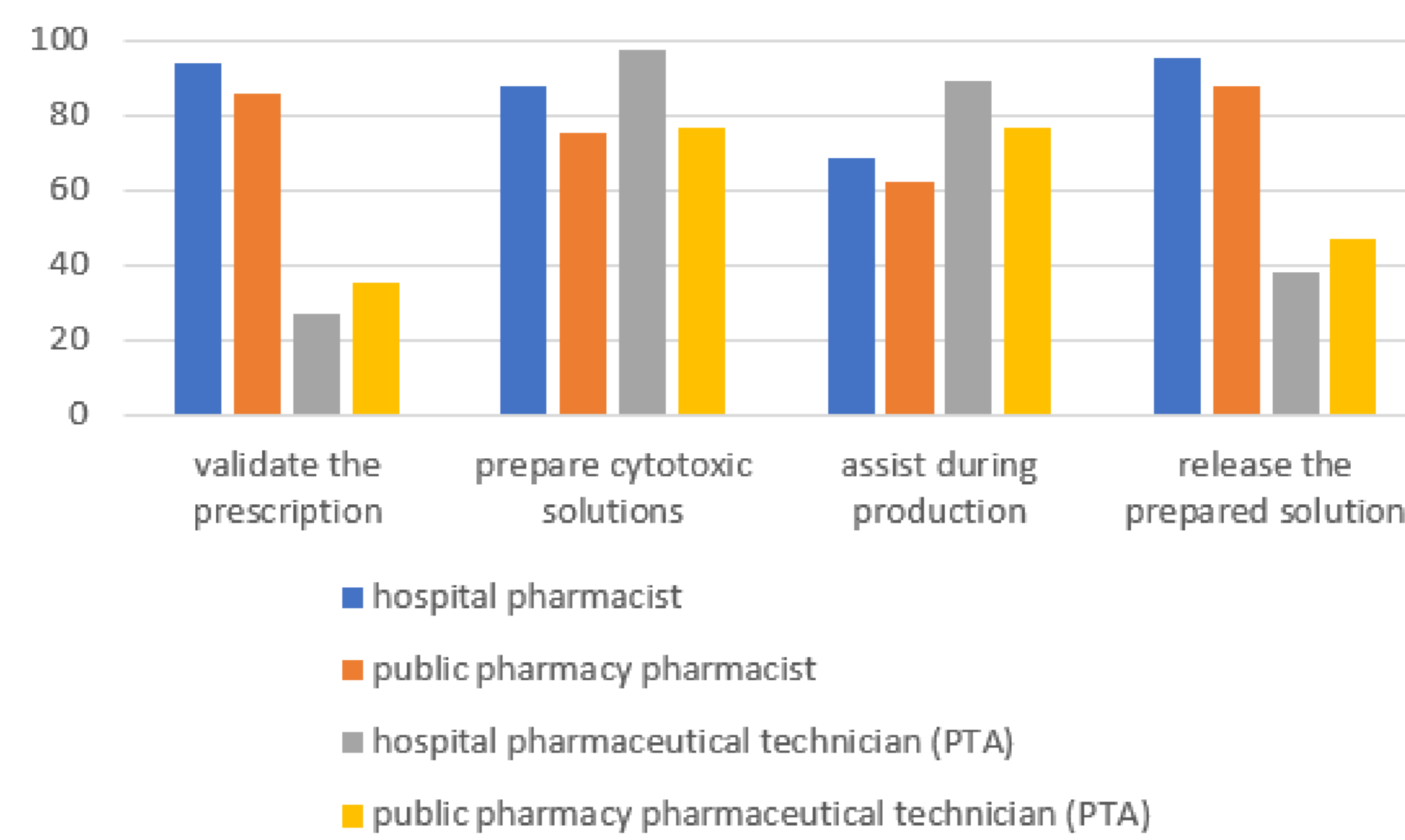


Fig.2: Pharmacists mainly validate the physician's prescription and release the prepared solution, with these activities playing a subordinate role among PTAs. In terms of hospital pharmacies, more PTAs prepare infusions, whereas in public pharmacies this task is performed equally by PTAs and pharmacists.

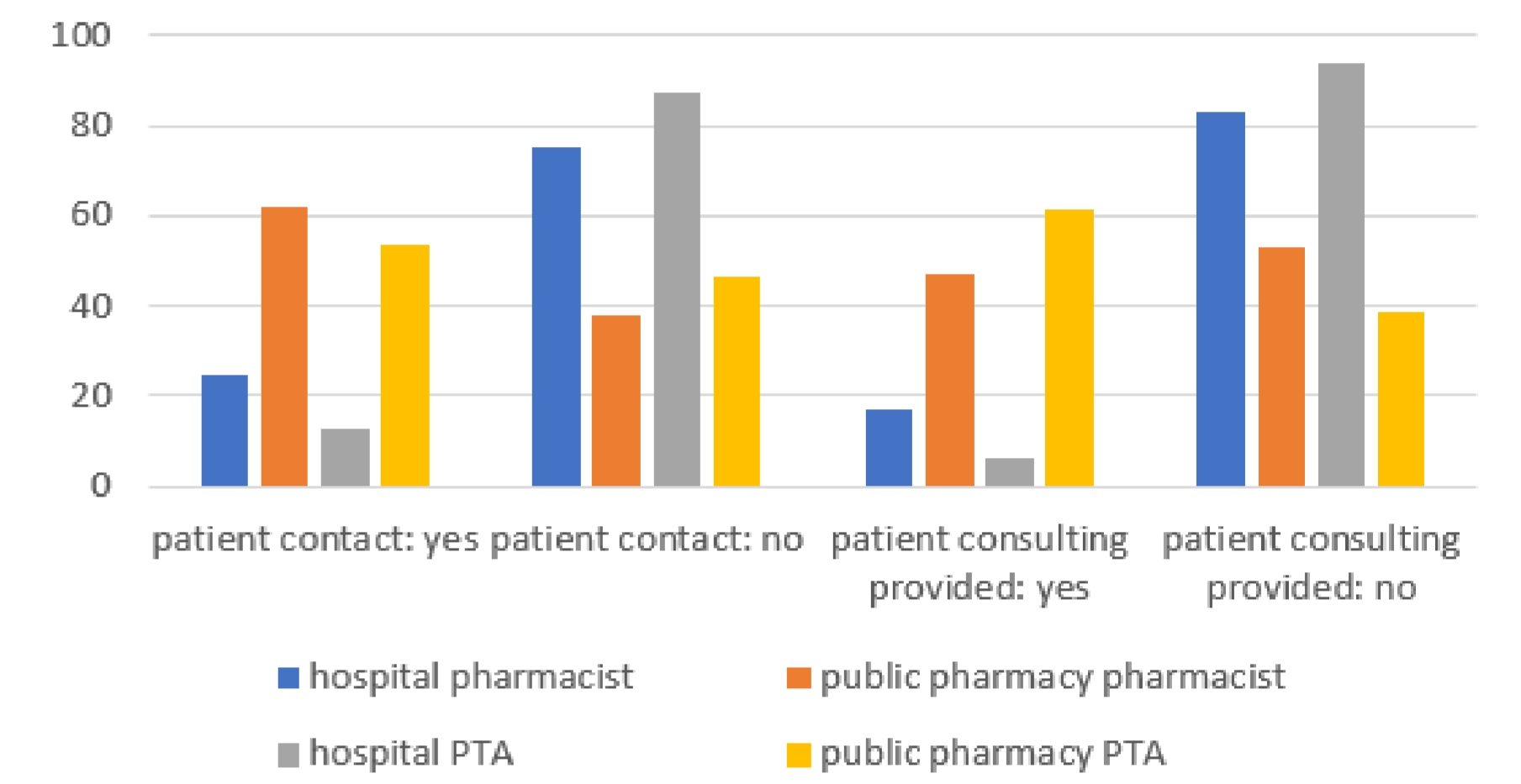


Fig.3: Pharmacists and PTA from hospital pharmacies have less patient contact than in public pharmacies, whereas in the latter the ratio between consulting PTA and pharmacists is similar.

3. Results and discussion

174 people from Germany took part in the survey. 116 of them are pharmacists, the rest are PTA and other professions. Almost 60 percent of the pharmacists and 70 percent of the PTA work in a hospital pharmacy, the rest is working in public pharmacy and other settings. All hospital participants prepare patient-related infusions, and 84 percent of public pharmacy participants also engage in this activity. Approximately 16 percent provide only oral cancer medications. To the question "How do you obtain the prescription?" very different answers emerge. From telephone to corresponding software, everything is included. The above figures show that the participants spend an average of more than four hours a day on oncology activities. Mostly, PTAs prepare the infusions and pharmacists release them. Participants from public pharmacies have the most patient contact. However, very few participants currently use the DGOP's Oral Drug database to care for cancer patients.



Fig.4: Mass-oriented production of patient related cytostatic infusions in the clean room Class B.



Fig.5: Pharmacist in a community pharmacy handing out anti-cancer medications and advising the patient on the proper way to improve adherence.

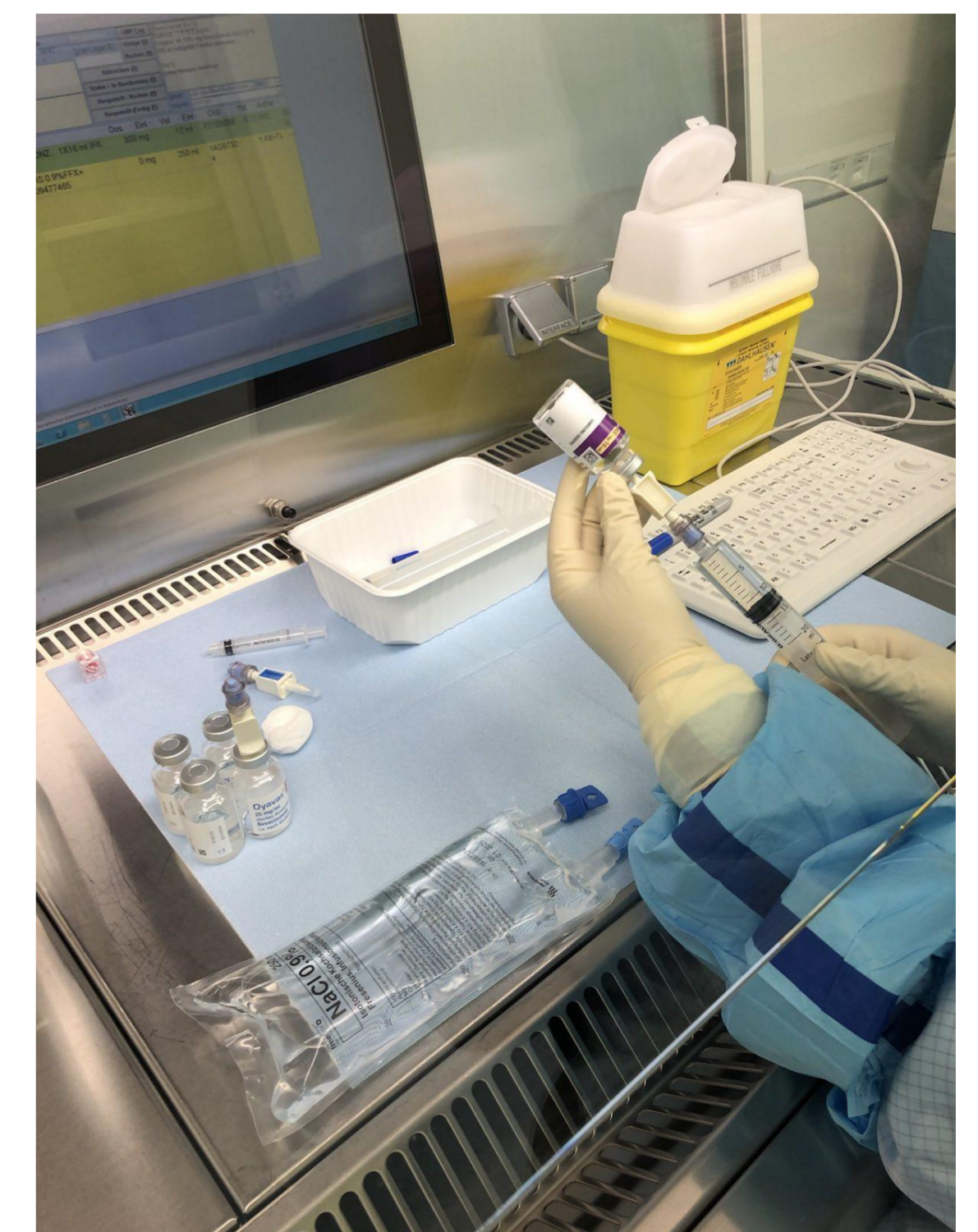


Fig.5: The drugs prescribed online by the doctor are produced computer-assisted by pharmaceutical assistants after validation by pharmacists.

Conclusion

In terms of quality assurance, it is necessary to standardize "the reception of the prescription". Written and computerized prescriptions would be desirable to minimize errors. The number of consultant pharmacists in hospital pharmacies can only be increased by creating ward pharmacists. Particularly in view of the increasing number of prescriptions for oral cancer drugs, the consultation should also be standardized here in order to meet the quality and professional standards.

Contact

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