



My day with Oncology Pharmacy - México



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1. Introduction

Derived from an ESOP survey in March and April 2022, professionals were asked about their working situation, regarding preparation of read-to-use cytotoxic drugs. All relevant daily working processes, including activities in prescription and validation of cytotoxic drugs, and clinical pharmaceutical support in patient care were addressed. This poster presents the country-specific evaluation.

2. Material and method

The survey with 18 questions was translated into different languages and distributed nationally using a web based application.¹ Complimentary, at AMeFOH (Mexican Association of Oncology Pharmacists) we conducted a review of our database to know where our members work and what they do in their different settings.²

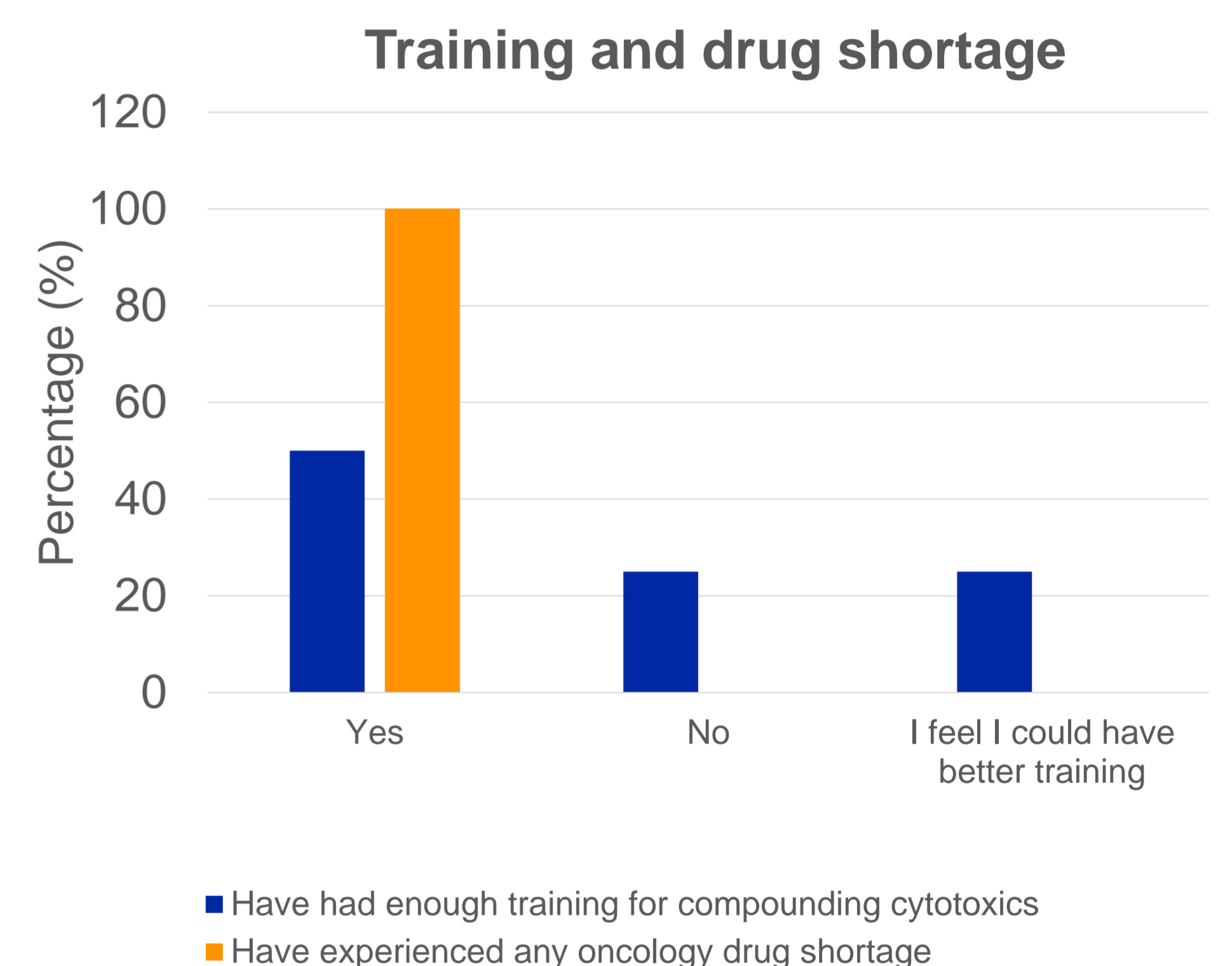
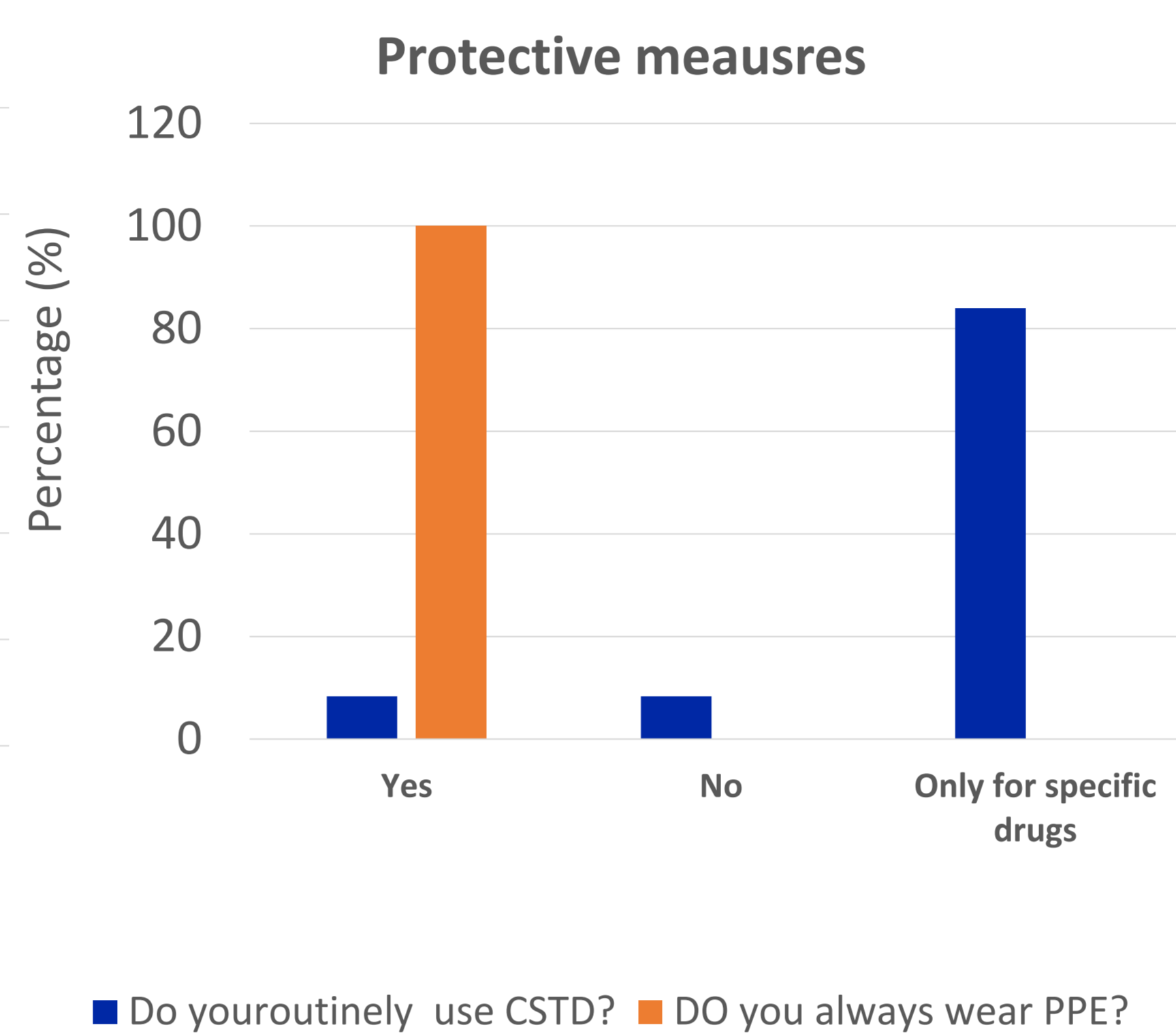
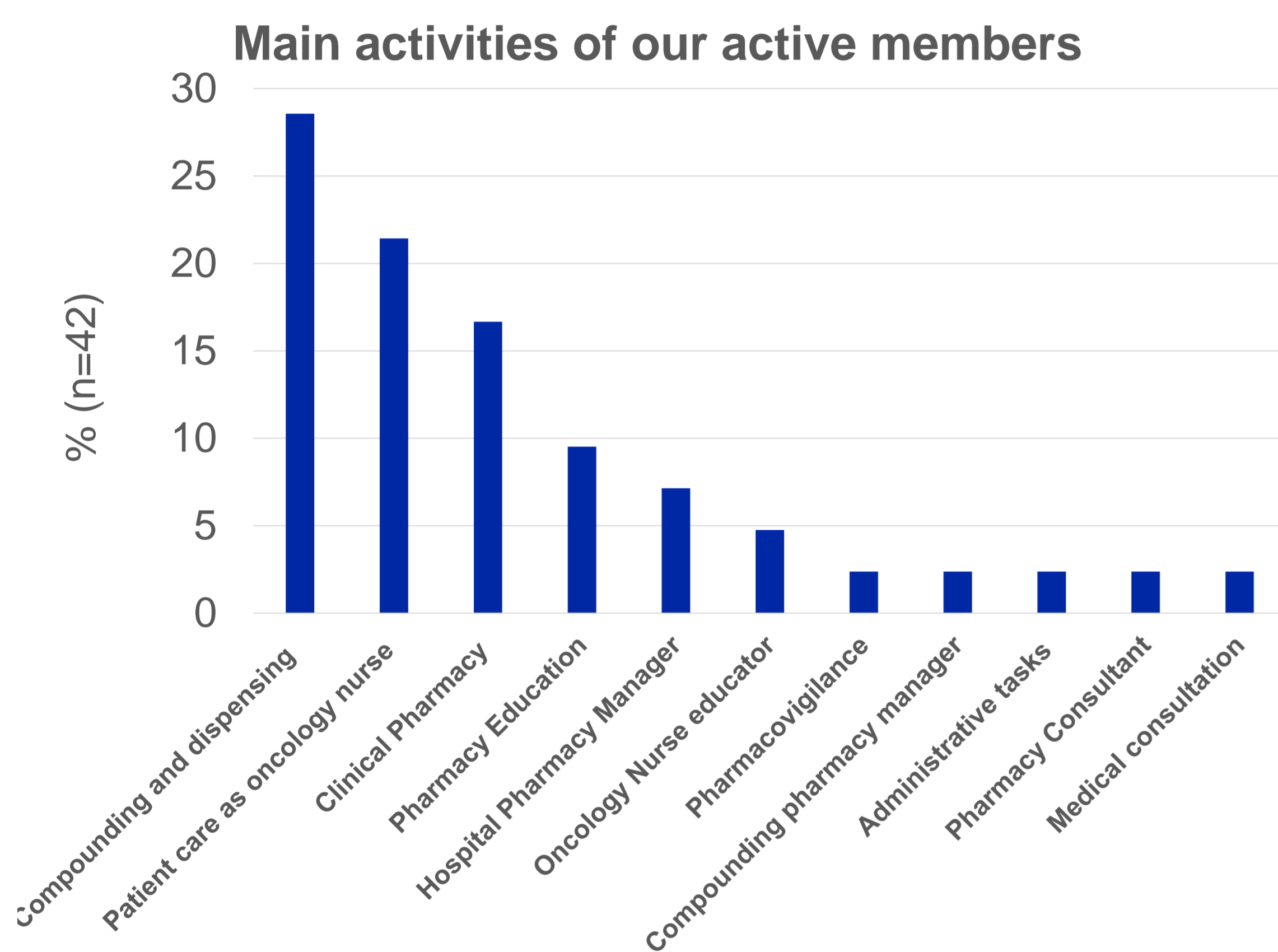


Fig.1: Main activities of our members. The main percentage are pharmacist involved in compounding and dispensing of the oncology treatments. AMeFOH allows oncology nurses too.

Fig.2: For those who prepare cytotoxics (29%), the 100% use Personal Protective Equipment (PPE) for compounding, and 84% use Closed System Drug-Transfer Device (CSTD) only with specific drugs, not for all antineoplastic drugs.

Fig.3: All of the staff who prepares cytotoxics have received at least a brief training about compounding (in a course, or at University).

3. Results and discussion

In Mexico we have a heterogeneous group of tasks as pharmacists, as shown in Fig 1. We have oncology nurses and pharmacists who develop their work in Clinical Pharmacy, without compounding.

The group of the pharmacists, who prepares cytotoxic drugs (almost 30% of the AMeFOH members) also validate the prescriptions. All of them use PPE and, at a given moment, also CSTD, as it is mandatory to handle some drugs, while it is not for some others. (Fig. 2)

Drug shortages was an important issue. In Mexico we suffered of it because one of the most important drug suppliers has been closed by the government. Some pharmacists believe that they could improve their training in the dispensation process of cytotoxic drugs. And that is where our Association and ESOP can help them to improve their practices day by day. Fig. 3.



Fig.4: Almost 30% of our members in AMeFOH make the compounding of the oncology treatments. Previous validation of the prescription is required, as well as dose calculation, procedure check and a quality system to make the process.



Fig.5: From this team, only one of these young pharmacists has a degree of Master in Oncology Pharmacy by a foreign University. In Mexico we do not have post graduate studies on Oncology Pharmacy yet.

Conclusion

The day-by-day in Mexico for Pharmacists in oncology is in development, with some disparities between the type of the centers and their practice settings.² The pharmacists in Mexico are doing an effort to get the best practices for the Oncology process, having every two weeks a conjunct session about useful topics for them, with the aim to standardize their practices, following international guidelines³, to make processes safer for everyone and to get enough time to dedicate for pharmaceutical care and making clinical pharmacy closer to the oncology patients, and not only with the task of compounding the antineoplastic treatments. Oncology Pharmacy post graduate studies do not exist in Mexico yet. Oncology nurses, medical oncologists and haematologists have taken part in some of the conjunct sessions, with a great multidisciplinary dialogue.

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References

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