My day with Oncology Pharmacy - Portugal

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1. Introduction

In order to characterize the processes and time spent of individual daily routine of Oncology Pharmacist a survey was carried out. Pharmacists from several hospitals answered the questions, there were 20 responses to the survey and they represent the actual situation in Portugal.

2. Material and method

Data collection was be carried out through the application of a survey that focused on the time spent in clinical oncology activities during the working day and frequency of activities. Up to 17 questions covered the following fields: Manufacturing patient specific infusions; Number of produced medications per day; Validation of prescription from physicians; Form of prescription (electronically or paper based); Release of produced medications; Patient consultation in medical properties; Side effects and setting up medication schedules; Invested working hours in oncological activities.

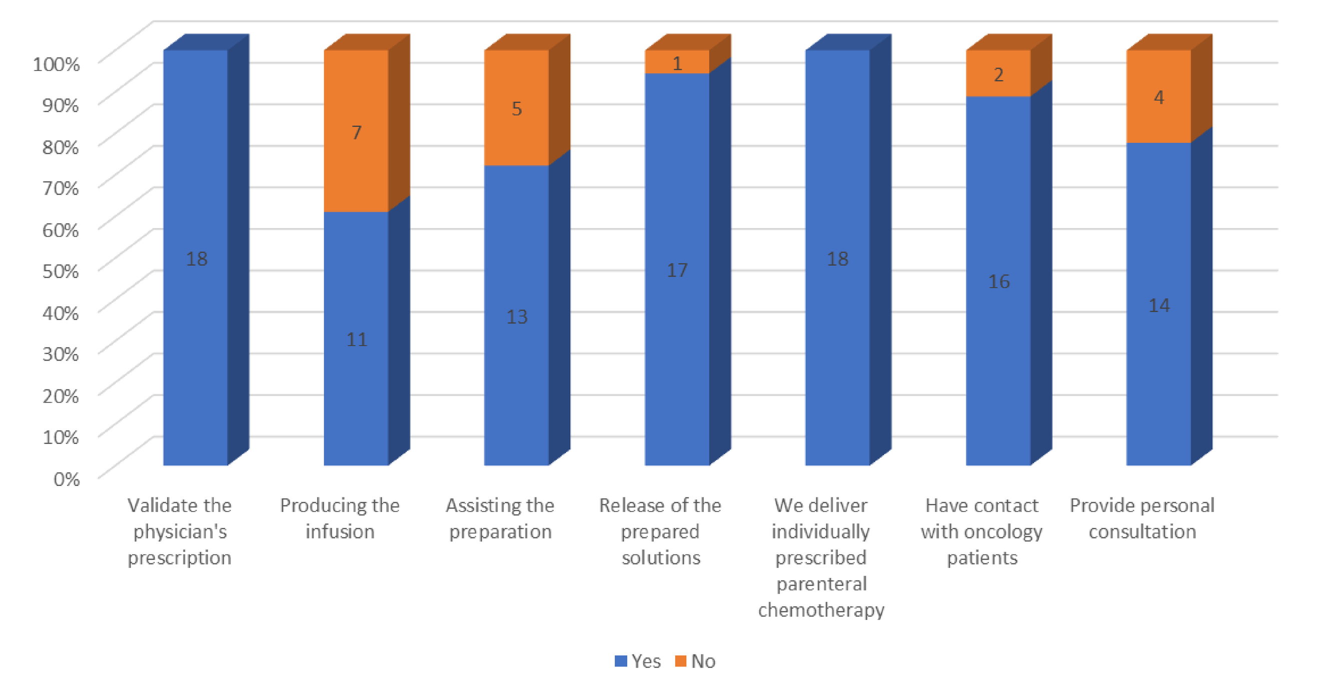

Fig.1: Involvement of the pharmacist in the preparation of intravenous cytotoxics and contact with the patient.

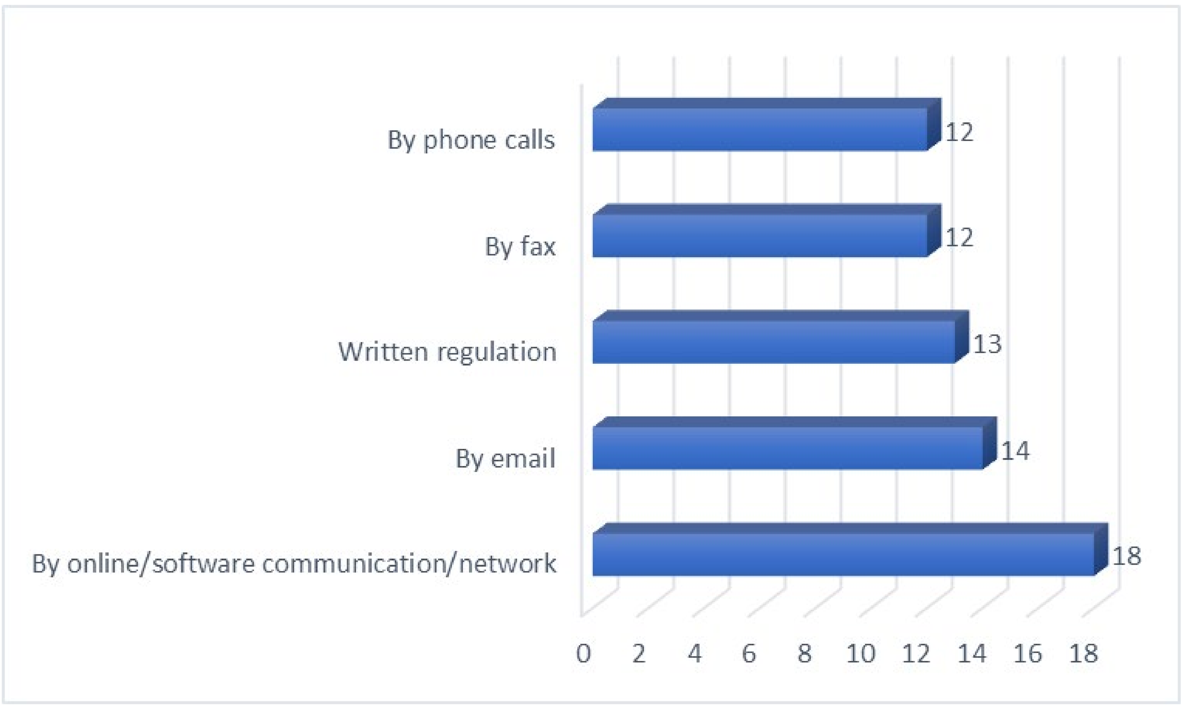

Fig.2: How the pharmacy receive the prescriptions.

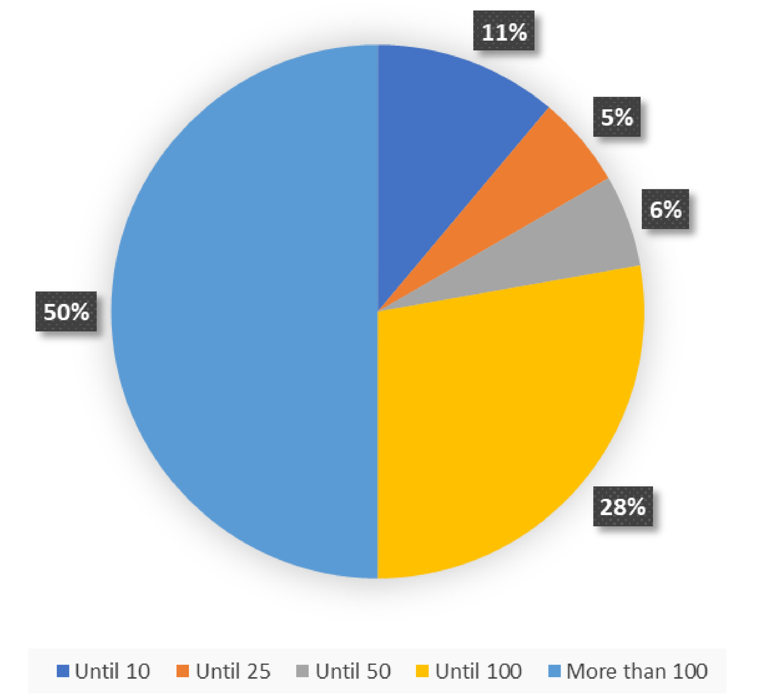

Fig.3: Average number per day (prescription/manufacures).

3. Results and discussion

All those who responded were pharmacists and worked in a hospital. Most belonged to the centre region (n=13), followed by the south region (n=4) and for the North region (n=3).In 90% (n=18) of the responses to the survey the pharmacist is involved in the preparation of intravenous cytotoxics for administration to patients, either in batch release (94%), handling (60%) or supervision of the preparation (70%). In 100% of the survey responses of those who are involved in preparation (n=18), the prescriptions are validated by pharmacists and received by an electronic way (via software system). About 80% (n=14) of the hospitals have a daily production capacity over than 50. In most cases (90%) the pharmacist has direct contact with the patient, providing information about the therapy. In 80 % of the responses a direct consultation with cancer patients is carried out. One of the responders does not participate in cancer treatment while another exclusively provides oral cancer medications to patients, and the remaining 50% who dispense do so very often throughout the week. Pharmacies (80%) order oral chemotherapy drugs directly from the manufacturers. In most cases (70%) the pharmacist spends all of their working hours on the treatment of cancer patients (Oncology Pharmacists).

Fig.4: Pharmacists provide personal consultations for cancer patients regarding oral and intravenous chemotherapy drugs.

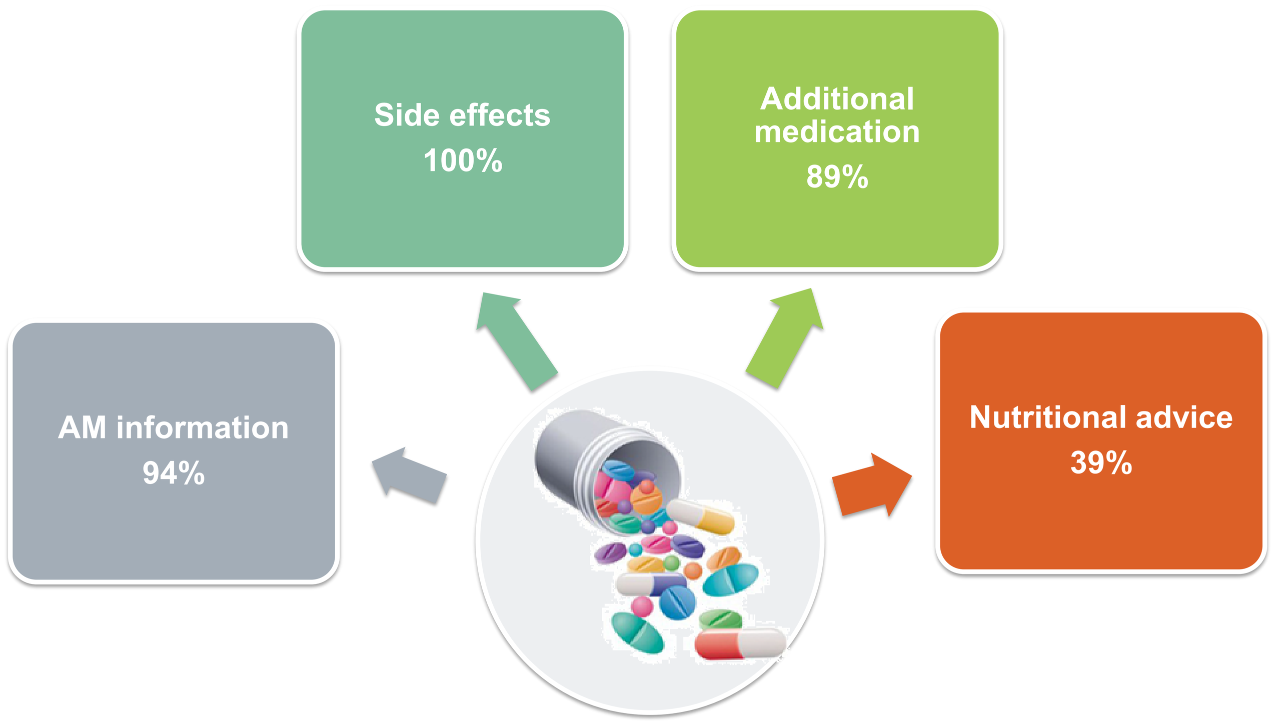

Fig.5: Personal consultation involves a discussion between a pharmacist and a patient to address various medication related concerns.

Conclusion

Pharmacists in oncology play a critical role in upholding medication safety. They are involved in the whole process of aquisition/preparation/delivery of either EV or oral cytotoxic. Furthermore we can see an increase in providing direct patient care through pharmacist consultations, to ensure treatment adherence and tolerance and to avoid drug interactions.

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