EVALUATION OF CLINICAL PHARMACY SERVICES IN A SECONDLINE TREATMENT OF METASTATIC NON-SMALL CELL LUNG CANCER WITH IMMUNE CHECKPOINT INHIBITORS

Aim and objectives
The aim of this study was to analyse the effectiveness, safety and degree of compliance with criteria established in our hospital for patients with mNSCLC undergoing secondline treatment with immunotherapy.

Material and methods
A retrospective descriptive study including patients with mNSCLC, receiving treatment with atezolizumab, nivolumab or pembrolizumab, from 1 December 2013 to 2 October 2019 was conducted. The electronic prescription programme in oncology and medical records were consulted. Data collected for each patient were sex, age, smoking status, treatment) and electronic health record (EHR) reviews were performed before the interview. The pharmacist identified drug related problems (DRP) and negative outcomes associated with the medications (NOAMs), defined according to the Third Consensus of Granada. Subsequently, the pharmacists made a report with the proposed pharmaceutical interventions (IP) which were included in the patient’s EHR. The intervention acceptance rate by haematologists was evaluated, as well as whether the DRP had been solved.

Results
Forty patients, 85% men, were included, with an average age of 70 (42–83) years, of whom 14 were current smokers and 23 were former smokers. A total of 37 patients presented at the beginning of treatment with PS ≤1. There were 18 lung adenocarcinomas and 22 with a non-squamous histology. No patient had active brain metastases at baseline or EGFR/ALK/ROS-1 mutations. PDL-1 expression was ≥1 in 17 patients. The schemes, average numbers and range of cycles were: atezolizumab 1200 mg every 3 weeks, 5 (1–14) cycles; nivolumab 3 mg/kg every 2 weeks, 12 (1–44) cycles; and pembrolizumab 2 mg/kg every 3 weeks, 6 (4–17) cycles. Median PFS and OS were 5 months (95% CI 2.9–17) and 14 months (95% CI 8.3–19.7), respectively. AR grade ≥3 reports were: asthenia (29%), pneumonitis (29%), renal disorder (14%), hyperglycaemia (14%) and gastrointestinal symptoms (14%). A total of 7.5% of patients did not comply with the conditions of use established at the start of treatment (PS ≥2).