

Supporting Patient Adherence to Oral Anticancer Medication for Patients with B-Cell Malignancies



Objectives



Learn about oral anticancer medication use and factors that influence medication adherence in B-cell malignancies



Assess available strategies to promote oral anticancer medication adherence

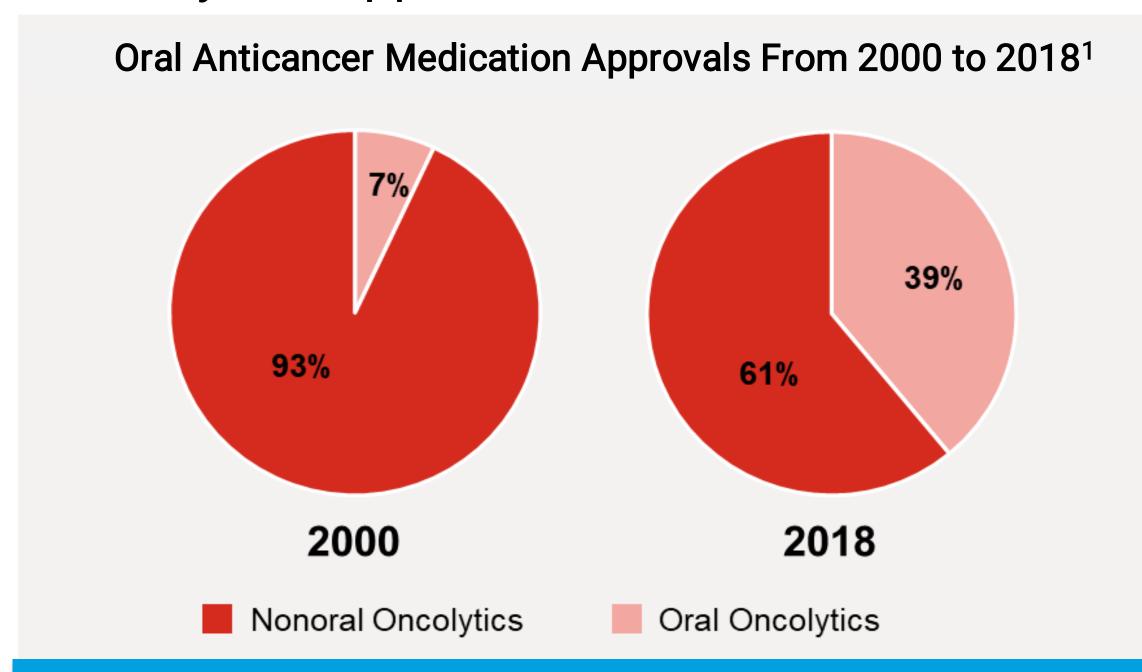


Formulate approaches to promote oral anticancer medication adherence based on approved guidelines



Oral Anticancer Medication Use Is on the Rise

Globally, the approval and use of oral anticancer medication has been on the rise¹



- Development and approval of oral anticancer medications is expected to continue with 11 new oral anticancer agents approved in 2020 compared to 6 oral anticancer medications approved between 2006-2010²
- Studies have shown patients with cancer often prefer oral over IV treatment if efficacy is not reduced or there are not higher rates of adverse events³

Advances in oral anticancer medication calls for an increased need to address challenges related to patient safety and medication adherence^{2,3}

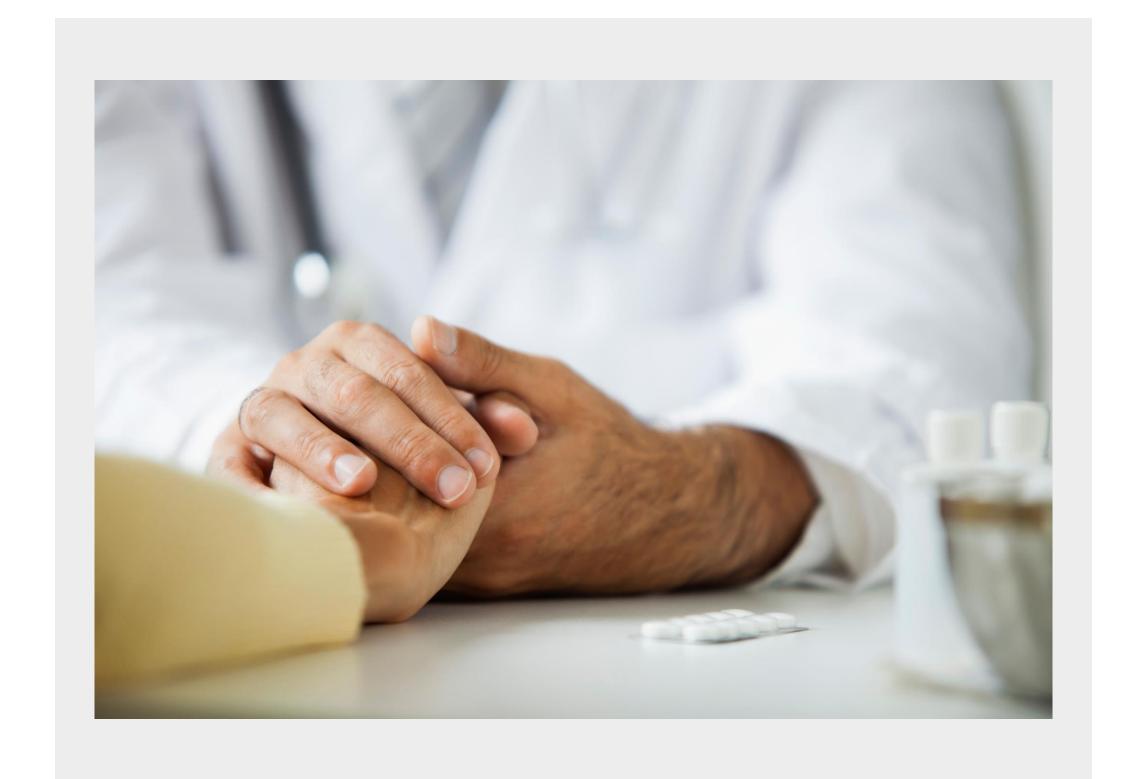


^{1.} Russel C and Nubla J. The Increased Approval of Oral Oncolytics: 1995-2018. National Community Oncology Dispensing Association

^{2.} Levit LA et al. *J Clin Oncol.* 2022;40(10):1036-1040

^{3.} Eek D et al Patient Prefer Adherence 2016;10:1609-1621

Oral Anticancer Medication Use Is on the Rise in B-Cell Malignancies



B-cell malignancies

- Over the last decade, several oral anticancer medications have been approved and more are being evaluated in clinical trials for B-cell malignancies¹
- There are limited data on the impact of non-adherence to oral anticancer medications in B-cell malignancies¹

B-cell malignancies are heterogenous and reasons for non-adherence are multifactorial. Adherence strategies are not one-size-fits-all and different approaches may be needed considering patient, disease, and treatment related factors. 1,2,3,4



^{1.} Zackon AYL et al. *Leuk Lymphoma*. 2019;60(10):2356-2364.

Levit LA et al. J Clin Oncol. 2022;40(10):1036-1040.
 Mackler E et al. J Oncol Pract. 2019;15(4):e346-e355.
 Zerillo JA et al. JAMA Oncol. 2018;4(1):105-117.

Many Barriers Have Been Identified to Affect Medication Adherence



Whereas some factors are **not modifiable**, such as **demographic or system-related factors**, psychosocial factors that are **modifiable**, such as **patient-physician relationships and positive perception** on **medication**, can be potential targets for improving adherence^{1,2}

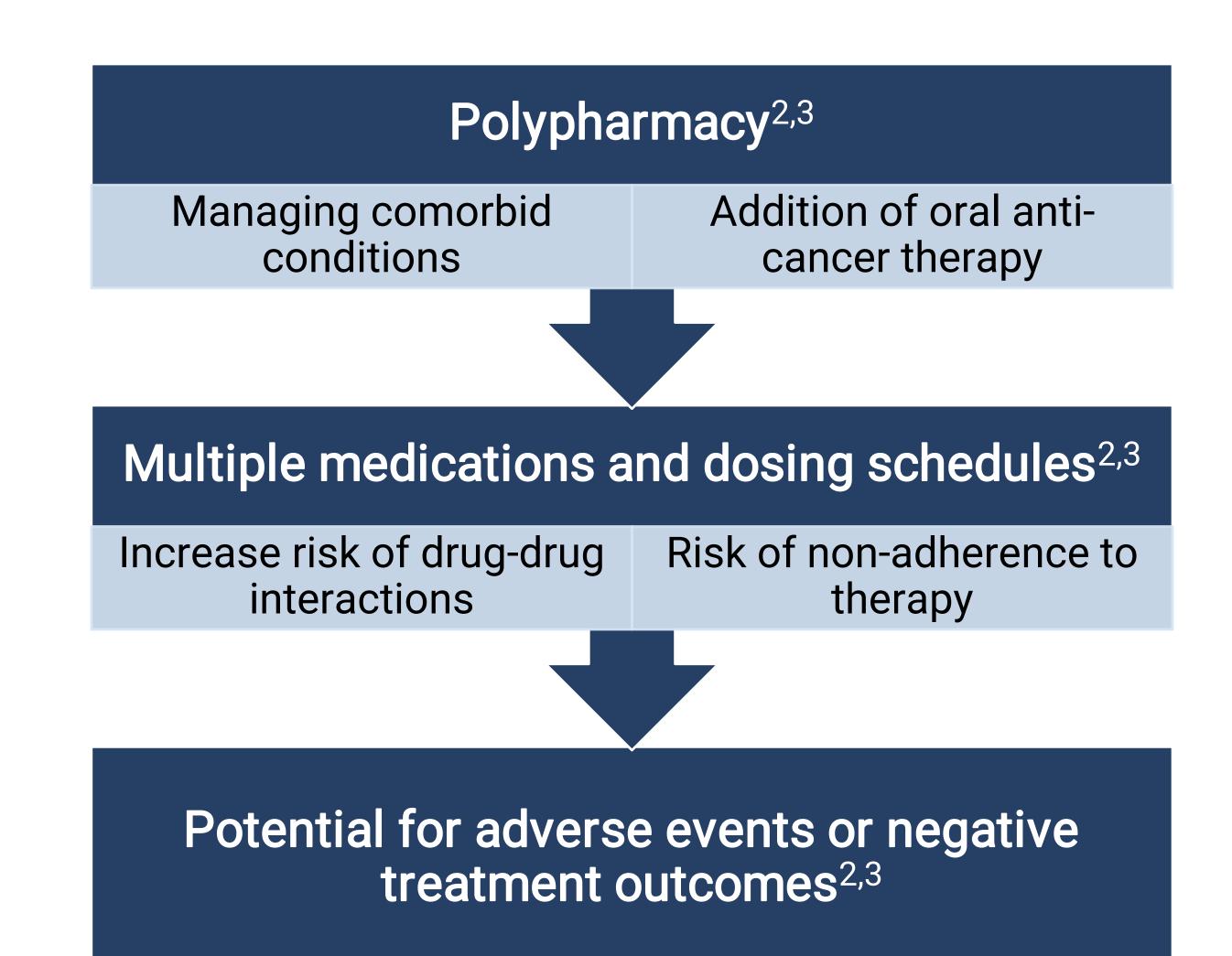


^{1.} Kvarnström K et al. *Pharmaceutics* 2021;13(7):1100

^{2.} Zackon AYL et al. *Leuk Lymphoma*. 2019;60(10):2356-2364.

Barriers to Oral Anticancer Medication Adherence in B-Cell Malignancies

- Average age at diagnosis of non-Hodgkin lymphoma (NHL) is 68 years (range 65 -74)¹
- Older adult patients are more likely to experience polypharmacy^{2,3}
- Dosing frequency and complexity may contribute to non-adherence³





^{2.} LeBlanc TW. et al. *Lancet Oncol.* 2015;16:e333-341.

Zackon AYL et al. *Leuk Lymphoma*. 2019;60(10):2356-2364.



Interventions for Oral Anticancer Medication Adherence



Building Patient Relationships^{1,2}

- Build a trusting relationship with patients
- Emphasize the importance of adherence
- Triage communication between the physician and patient



Providing Education^{1,2}

- Include written instructions for the prescribed medication
- Reinforce drug education and management of AEs
- Suggest support groups and organizations



Utilizing Technology²⁻⁵

- Utilize smart pill bottles and mobile applications
- Set up automatic SMS/mobile text alerts and alarms

^{5.} Park HR et al. Cancer Nursing. 2022;45(6):E874-E882.



^{1.} Zackon AYL et al. *Leuk Lymphoma*. 2019;60(10):2356-2364C

^{2.} Mackler et al. Journal of Oncology Practice. 2019;15(4):e346-e355

^{3.} Medeiros KS et al. *BMJ Open* 2019;9(11):e027246

^{4.} Mauro J et al. J Manag Care Spec Pharm. 2019;25(11):1244-1254.

Management Requires Multidisciplinary Expertise

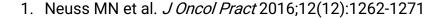
- The management of patients with cancer requires the multidisciplinary expertise of multiple groups¹
- The relationship between patients and their oncology health care team may influence adherence²
- Additional research on how to optimize and implement better care delivery and care coordination is ongoing²



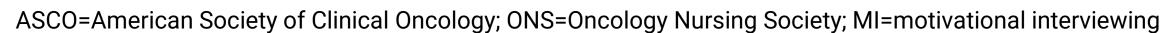
^{2.} Zackon AYL et al. *Leuk Lymphoma*. 2019;60(10):2356-2364C

Guidelines to Promote Adherence to Oral Anticancer Medications

Guidelines or Practice Standards	Key Recommendations
ASCO/ONS Chemotherapy Administration Safety Standards for Drug Adherence ¹	Monitoring After Chemotherapy Is Administered (Domain 4) • Reviews monitoring adherence to, and toxicity from, chemotherapy to promote safety both during treatment and after therapy
Oncology Nursing Society (ONS) Guidelines [™] to Support Patient Adherence to OAMs ^{2,3}	ONS Adherence Toolkit Oral An online guide with resources to help improve oral drug adherence, including: • Sample treatment calendars • Traditional counseling versus MI • Methods used to encourage patient adherence • Developing a process of medication tracking • Factors influencing adherence
Hematology/Oncology Pharmacist Association (HOPA): Best Practices for Pharmacists in the Management of Oral Oncolytic Therapy ⁴	Best Practices for Pharmacists in the Management of Oral Oncolytic Therapy • Prescribing • Education • Dispensing and distribution • Monitoring and follow-up • Practice management



^{2.} Belcher SM et al. *Oncol Nurs Forum* 2022;49(4):279-295





Oncology Nursing Society. Last accessed: May 23, 2022. https://www.ons.org/sites/default/files/ONS_Toolkit_ONLINE.pdf

^{4.} Mackler E et al. *J Oncol Prac* 2019;1a5:4, e346-e355

Key Takeaways

- The use of, and preference for, oral anticancer therapies is on the rise^{1,2}
- Despite the clinical benefits of oral anticancer medications in treating patients with B-cell malignancies, managing and monitoring drug adherence remains a clinical challenge^{3,4,5}
- Oral oncolytic adherence studies have shown that a multi-disciplinary healthcare team can identify patient and therapy-related barriers, monitor for adverse events, and determine what strategies may be effective to safely impact adherence^{4,5}
- Guidelines and best practices are available from ASCO, ONS, and HOPA to support patient adherence^{6,7,8}

- 1. Eek D, Krohe M, Mazar I, et al. Patient Prefer Adherence 2016;10:1609-1621
- 2. Russel C and Nubla J. The Increased Approval of Oral Oncolytics: 1995-2018. National Community Oncology Dispensing Association
- 3. Greer JA, Amoyal N, Nisotel L, et al. Oncologist 2016;21(3):354-376
- 4. Zerillo JA. *JAMA Oncol.* 2018;4(1):105-117
- 5. Zackon AYL et al. *Leuk Lymphoma*. 2019;60(10):2356-2364C
- 6. Neuss MN et al. *J Oncol Pract* 2016;12(12):1262-1271
- 7. Belcher SM et al. *Oncol Nurs Forum* 2022;49(4):279-295
- 8. Mackler E et al. *J Oncol Prac* 2019;1a5:4, e346-e355

ASCO=American Society of Clinical Oncology; ONS=Oncology Nursing Society; HOPA=Hematology/Oncology Pharmacy Association

