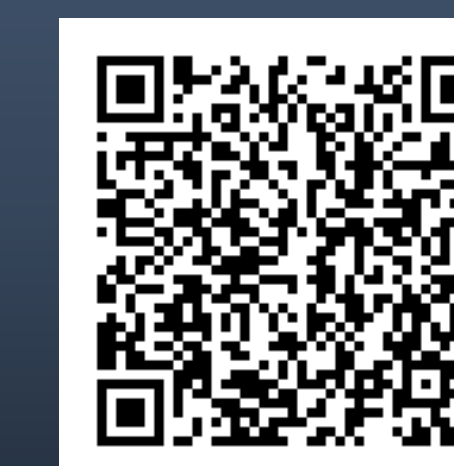


PHARMACIST-LED MONITORING FOR PATIENTS INITIATING PARP INHIBITOR THERAPY



Brooke D. Looney, PharmD¹ | Stephanie G. White, PharmD¹ | Ryan Moore, MS² | Autumn D. Zuckerman, PharmD, BCPS, AAHVP, CSP¹ | Leena Choi, PhD² | Paul Hueseman, PharmD, MS³ | Kristen W. Whelchel, PharmD¹ |

¹Vanderbilt Specialty Pharmacy, Vanderbilt University Medical Center ²Department of Biostatistics, Vanderbilt University Medical Center ³AstraZeneca, Inc.

CONCLUSIONS

- Patients receiving pharmacist-led monitoring had fewer and shorter dose interruptions during the first 90 days of poly (ADP-ribose) polymerase inhibitors (PARPi) therapy
- Fewer hospitalizations occurred during the first 90 days of PARPi therapy in patients receiving pharmacist-led monitoring

PURPOSE

To evaluate the impact of pharmacist-led tailored monitoring on medication interruptions, dose reductions, discontinuations, and ER visits/hospitalizations over the first 90 days of treatment in patients initiating PARP inhibitor therapy.

METHODS

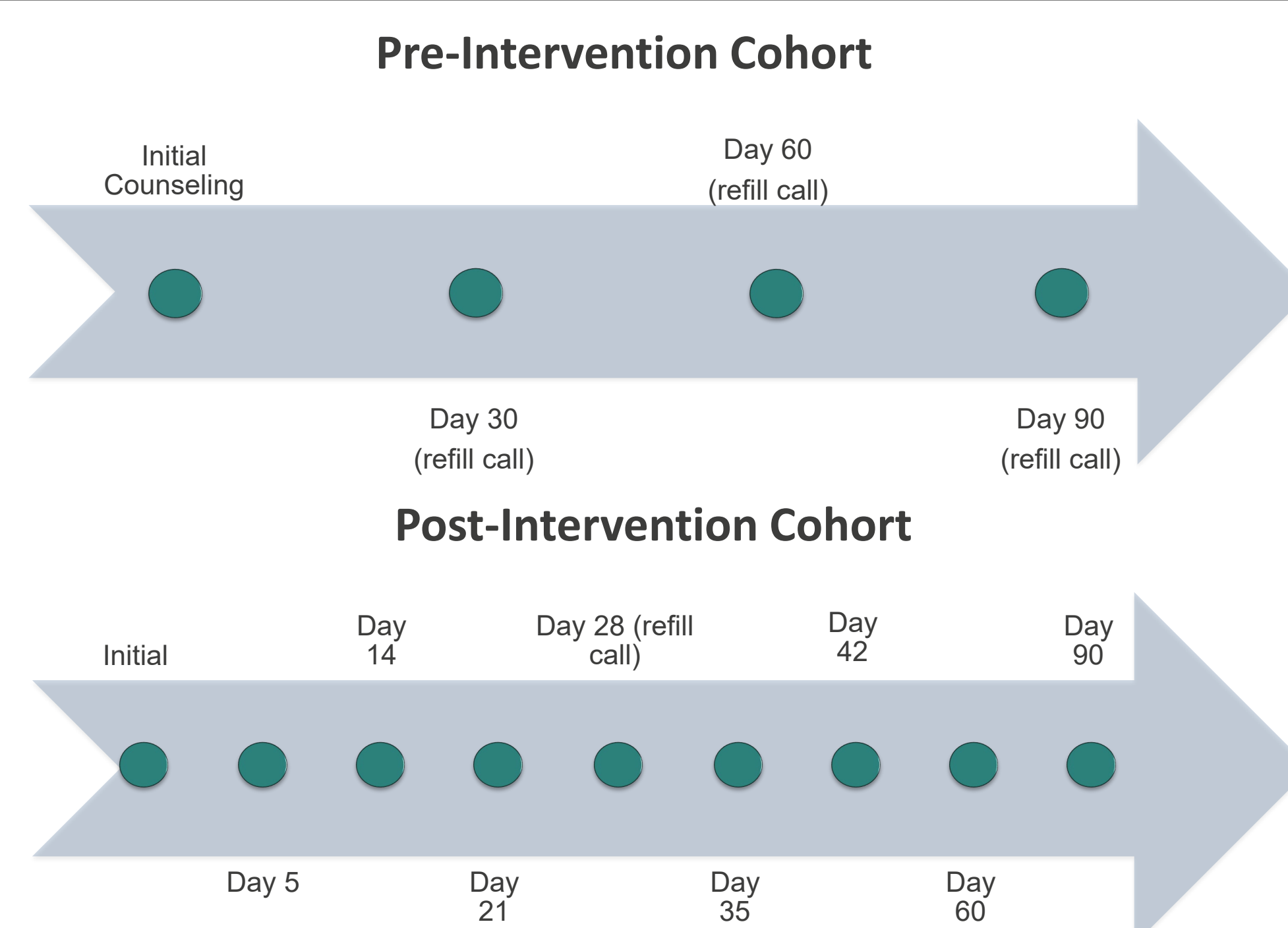
Single center pre/post intervention study

Adult patients initiating PARPi therapy
Pre-intervention
November 2017 – October 2019
Post-intervention
July 2021 – October 2022

Filled by the Vanderbilt Specialty Pharmacy or manufacturer assistance program

FIGURE 1. MONITORING SCHEDULE*

FIGURE 2. MONITORING TOPICS



*Refill calls were completed by the pharmacy technician. All other monitoring was completed by the pharmacist.

RESULTS

TABLE 1. COHORT CHARACTERISTICS

	Pre-Intervention n (%) n=28	Post-Intervention n (%) n=29
Age, years-median (IQR)	62 (53-72)	63 (56-69)
Gender, female	27 (96)	26 (90)
Race		
White	23 (82)	26 (90)
Black	4 (14)	2 (7)
Other	1 (4)	1 (3)
Disease duration, years-median (IQR)	1.8 (1.4-3.6)	1.1 (0.6-3.3)
Cancer type		
Ovarian*	23 (82)	20 (69)
Breast	3 (11)	6 (21)
Prostate	1 (4)	1 (3)
Pancreatic	1 (4)	2 (7)
PARP inhibitor		
olaparib	25 (89)	26 (90)
niraparib	0 (0)	3 (10)
rucaparib	2 (7)	0 (0)
talazoparib	1 (4)	0 (0)

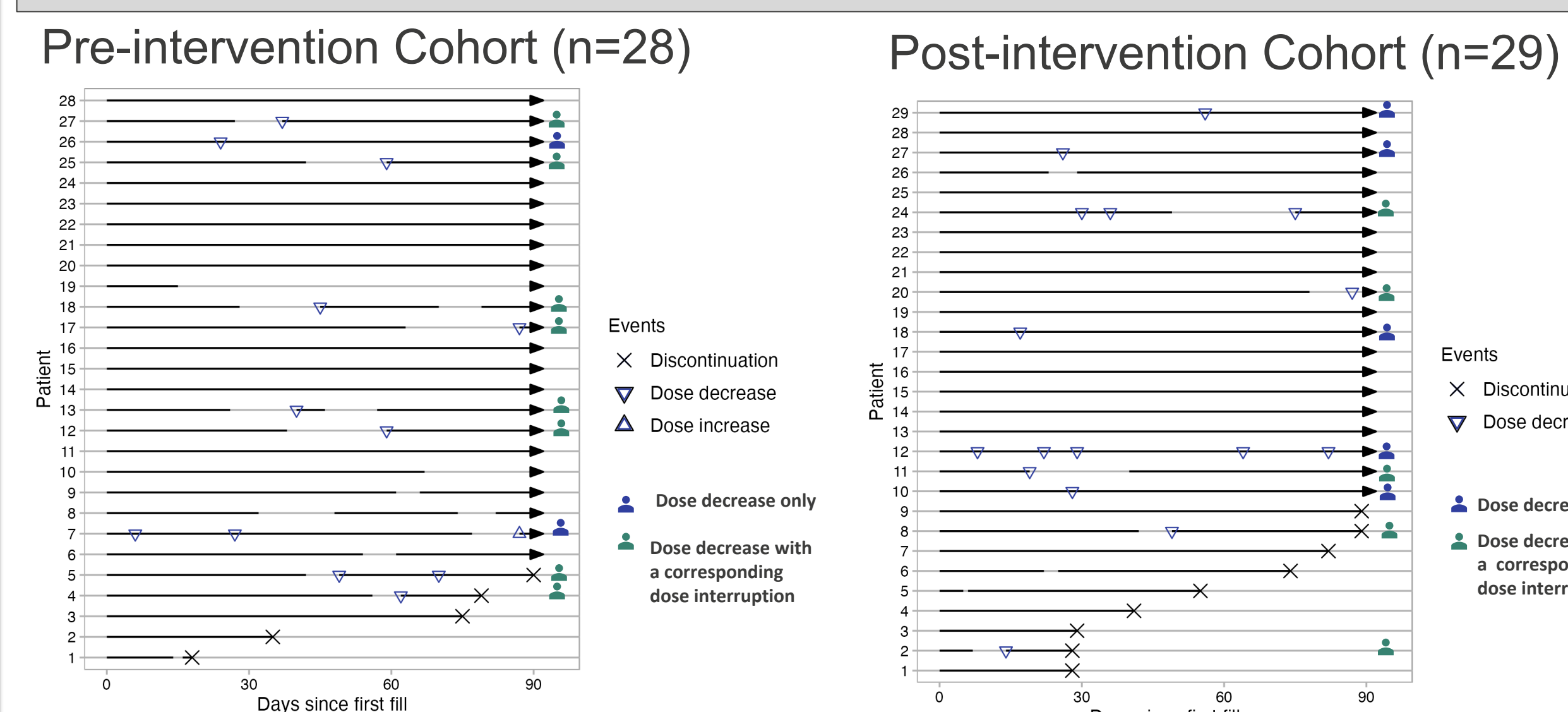
* Ovarian included ovarian, fallopian tube, or primary peritoneal

FIGURE 3. ADVERSE EVENTS

	Week 1		Week 2		Week 3		Week 4		Week 5		Week 6		Day 60		Day 90		Total	
	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post	Pre	Post
Fatigue	3	7	1	16	2	11	6	3	1	11	4	9	4	10	4	9	25	76
Nausea	4	15	3	13	3	9	4	2	2	9	3	5	4	3	1	2	24	58
Arthralgia/myalgia	1	3		2		1			2	3	1	2	2	1	3	3	9	15
Diarrhea		4		3	2	2		1		1		2			1		3	13
Dyspepsia		1		2		2				2		1		1	2		2	9
Headache		5		3	1					3	1		1				6	9
Vomiting	1	1	1	3	2	1	1		1	1	1		3	1			10	7
Constipation	1	2		1	1	1	1			1			1	1	2		4	7
Edema	1			1	1	2	1	1		1		2	1		1		5	7
Dizziness		1		3		2	1					1	1	1	1		4	7
Dysgeusia	1					1	1			1	1	1	1	1		2	4	6
Stomatitis						1			1	1		1		1		2	1	6
Anemia	1		2			1	4		3		1	1	4	1	3		18	3
Bloating										1		1				1		3
Cough			1	1		1				1	1						2	3
Dyspnea				1		1				1	1		2		2		5	3
Thrombocytopenia				1		1	2		2	1	2		1				7	3
Decreased appetite	1		1			1	1		1	1			1	1			6	2
Elevated creatinine			1	1	1	1	4						2		2		10	2
Weakness			1						1		1				1		4	
Other*	1		2	4	3	2	3	1	3	6	1		1	2	1	4	15	19
Total	15	39	13	55	15	41	28	9	18	38	22	29	29	24	24	23	164	258

* Other AE were reported <3 times in both cohorts

FIGURE 4. PATIENT JOURNEY



80% of patients with a dose reduction also had a corresponding dose interruption VS 50% of patients with a dose reduction also had a corresponding dose interruption

FIGURE 6. MEDIAN LENGTH (DAYS) of TREATMENT INTERRUPTIONS

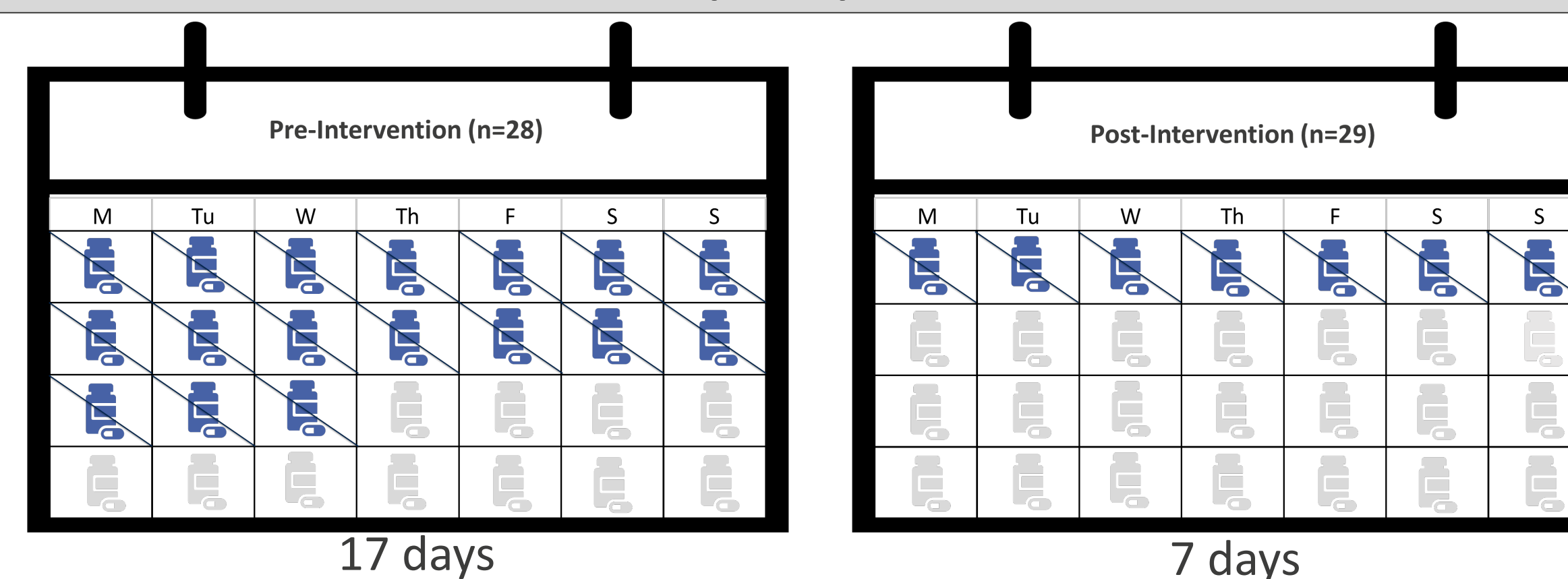


FIGURE 5. SUMMARY OF THERAPY CHANGES, HOSPITALIZATIONS, and ER VISITS

Post-intervention

- Fewer therapy interruptions
- Fewer hospitalizations

Reason for Discontinuation

- Disease progression (80% Pre vs 89% Post)
- Adverse events (20% Pre vs 11% Post)

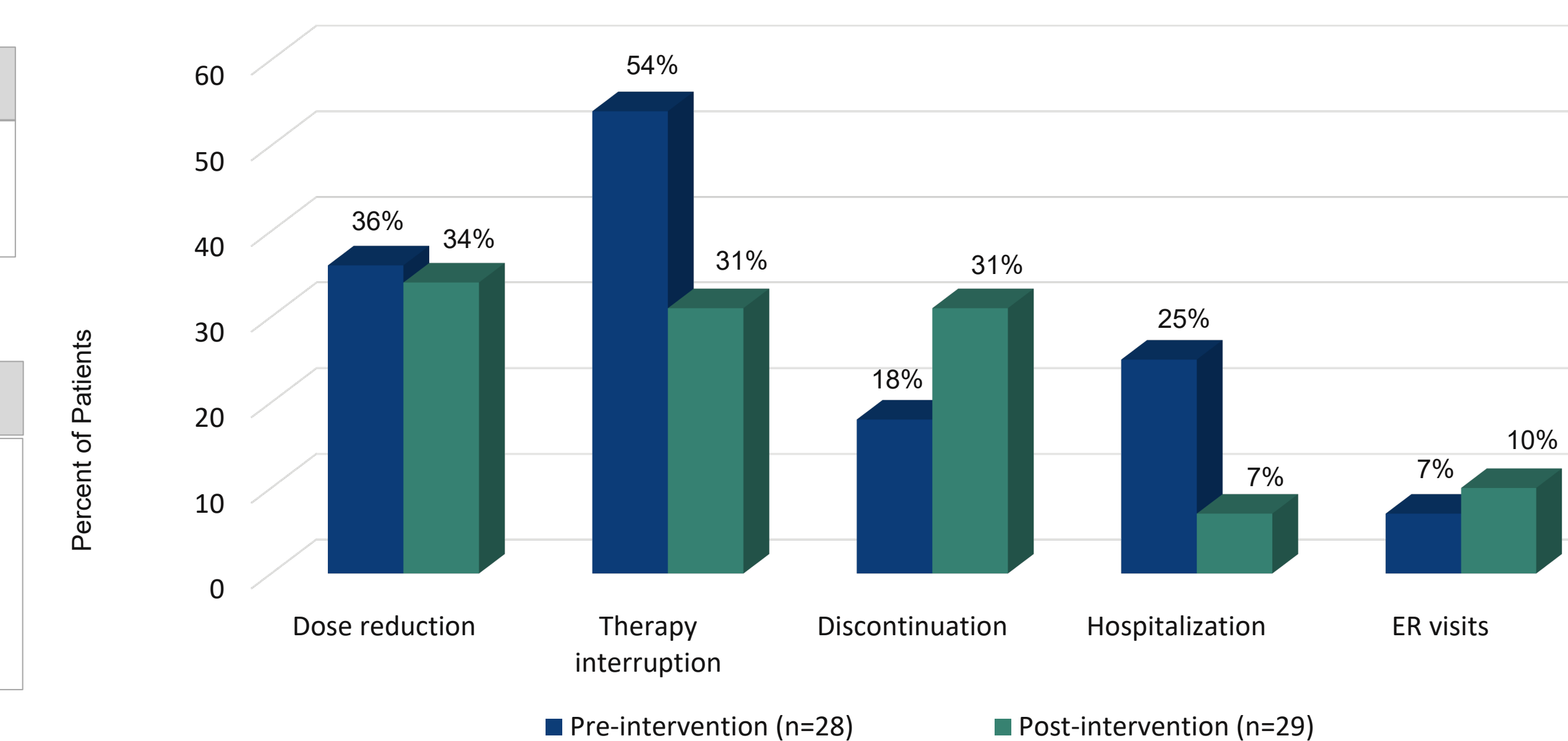


FIGURE 7. PERCENT OF PATIENTS MAINTAINING THERAPY IN THE FIRST 90 DAYS OF TREATMENT

