

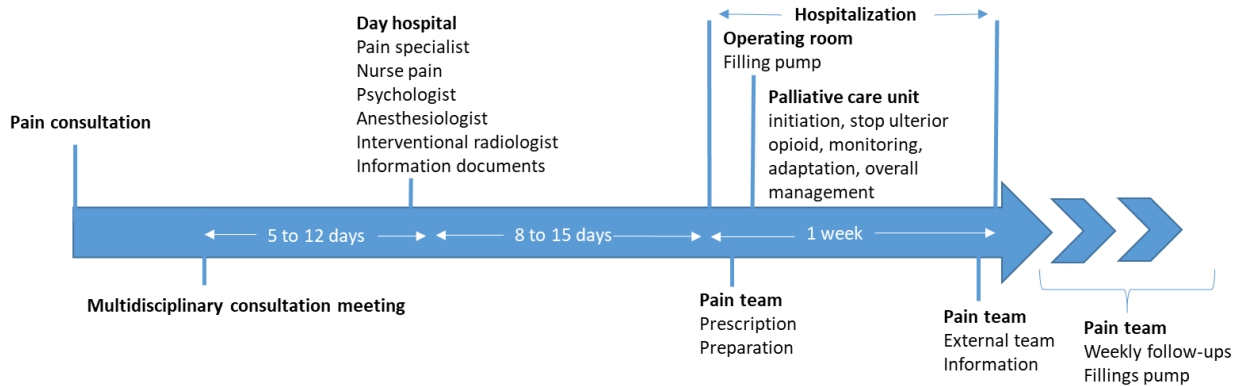


Structuring and deployment of the IntraThécale Auvergne Rhône-Alpes (ITARA) program for patients suffering from refractory cancer pain

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Introduction

Incidence and intensity of pain increase with cancer progression. Most often, well-conducted analgesic treatments control pain, with a satisfactory quality of life. However, approximately 10 to 15% of patients will have refractory pain, despite well-conducted treatments. Several cohort studies, a randomized study, a meta-analysis and the work of the American “polyanalgesic conference consensus” encourage us to propose intrathecal analgesia as a safe and effective technique in the context of refractory cancer pain. This technique is largely underused in France even though health authorities recommend it.



Method

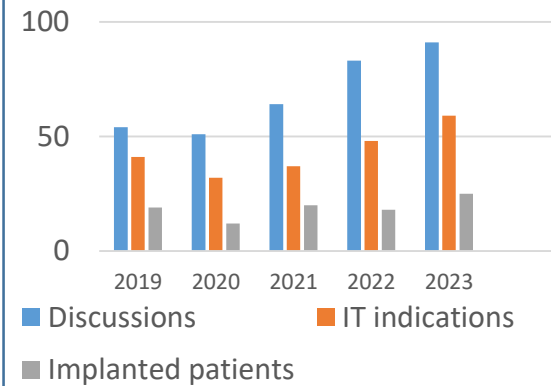
The challenges identified to the deployment of this technique are the following: mastering the indication, the presence of an installer, access to beds, a qualified team to initiate the treatment, monitor it, reassess it and manage complications, involvement of the hospital pharmacist. The ITARA project therefore offers: bimonthly regional Multidisciplinary Tumours Boards (MDTBs), swift organization for implementation and start-up in an expert center, weekly telephone monitoring of patients by the team in charge, centralized preparation and iterative filling pumps in an expert center or in a partner site, telephone response twenty-four hours a day, seven days a week, information and training at a partner site or expert center as needed.

Conclusion

The structuring and deployment of the ITARA program facilitated access to intrathecal analgesia for patients suffering from refractory cancer pain by supporting healthcare institutions according to their needs. A national work has been developed by the sub-committee pain of cancer of the French Society for the Study and Treatment of Pain to help the deployment of this technology on the French territory : IntraThécal SFETD Toolbox.

Results

Since its implementation in 2019, 36 institutions participated at least once to the MDTBs. Clinical activity developed in 10 of the 12 departments of the AURA region. In 2023, 90 cases were discussed at MDTBs and 57 intrathecal (IT) indications validated. Four institutions became completely autonomous.



In 2023, 48 patients with intrathecal analgesia were identified in the region for cancer pain (41 of them went through the Centre Léon Bérard), which represents:

- about 280 preparations
- 52 weekly IT points, including 49 of which with at least one of the connected partner teams
- Almost a hundred telephone contacts carried out by nurses with external teams, in addition to weekly follow-ups directly with patients (more than 600 follow-ups), and internal coordination work
- Filling pumps of 10 patients on site by 1 doctor and 1 CLB nurse due to the inability to move patients: 8 at home and 2 in partner hospital

