

NEW PROTOCOL FOR THE MANAGEMENT OF IMMEDIATE HYPERSENSITIVITY REACTIONS IN AN ONCOLOGY OUTPATIENT DEPARTMENT

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Introduction

Management of immediate **hypersensitivity reactions (HSRs)** is an every-day practice issue in medical oncology departments.

We conducted this study in order to **improve patient care** and understanding of HSRs.

Methods

For the first part of our study, in order to develop an internal consensus on HSRs management, we held several multidisciplinary meetings.

For the second part of the study, we conducted a **prospective assessment**. Eligible patients were aged 18 years or older and received an anti-cancer treatment in outpatient medical oncology unit in **Oscar Lambret Center in Lille, France**, between January 15, 2023 and October 15, 2023.

Results

First, this work has led to a consensus enabling a **new management guidelines**: Figure 1.

Second, we were able to **describe all HSRs in real life**. We identified 25 HSRs involving 23 patients (we treat about 100 patients a day, 5 days a week). On average, a reaction occurred **every 9.8 days**. According to Brown's classification, our observations included **9 grade 3 HSRs (36%)**, 9 grade 2 HSRs (36%), and 7 grade 1 HSRs (28%). Most frequent treatments involved in grade 3 HSRs are shown in Figure 2. HSRs to Paclitaxel were grade 3 in 43% of cases and HSRs to Carboplatin were grade 3 in 50% of cases. After HSR, we observed a **change in planned anti-cancer treatment strategy** (i.e. delay in administration of the next course of treatment and/or change of drug) in **76% of cases** (89% for grade 2 HSRs and 100% for grade 3 HSRs).

Results: figures

Figure 1: local management guidelines

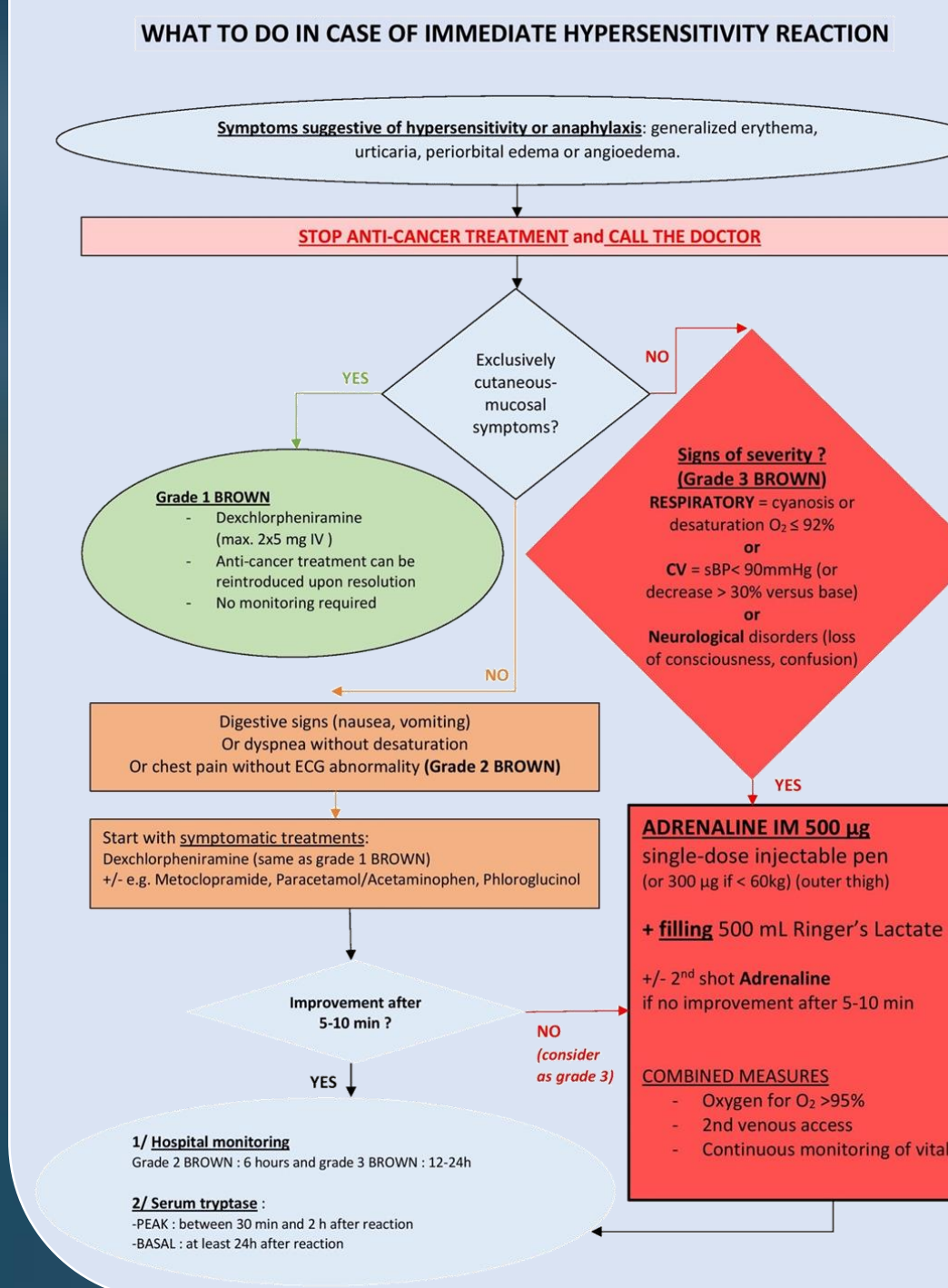
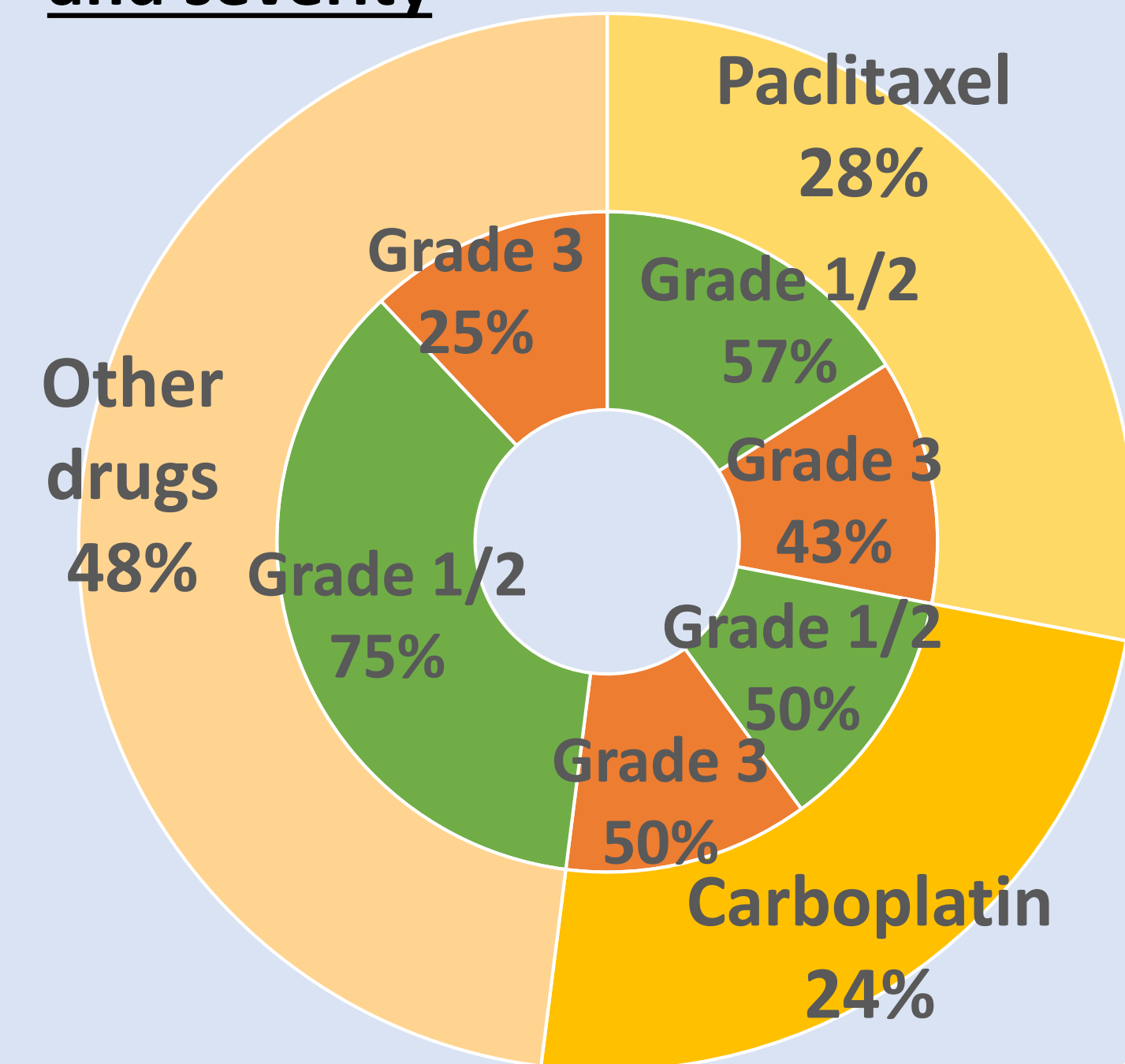


Figure 2: main drugs involved and severity



Conclusions

Our work has **standardized** the management of HSRs in our cancer hospital, thus **improving the quality of care**. It also permits **close monitoring** of HSRs, enabling us to understand them more clearly, in particular because we have increased our rate of reporting to the regional **pharmacovigilance** center.