Pharmacist and Student Pharmacist Interventions in Supportive Oncology Clinic

Laura Meyer-Junco, PharmD, BCPS, CPE, FASCP^{1,2}, Kate Riker, PharmD¹, Mohammed Ilyas Ahmed Khan, MD²

Introduction

- Integrated care, coordinated among physicians, pharmacists, nurses, and other health professionals, is essential to achieving medication therapy outcomes that improve patient quality of life.
- Few trials or studies have been conducted to demonstrate the impact of pharmacist and student pharmacist interventions in a multidisciplinary palliative care clinic.
- The addition of clinical pharmacy patient care services to health care teams can improve adherence, improve transitions of care, decrease preventable adverse effects and interactions, and decrease polypharmacy and related hospitalizations or re-hospitalizations.^{1,2}

Objective

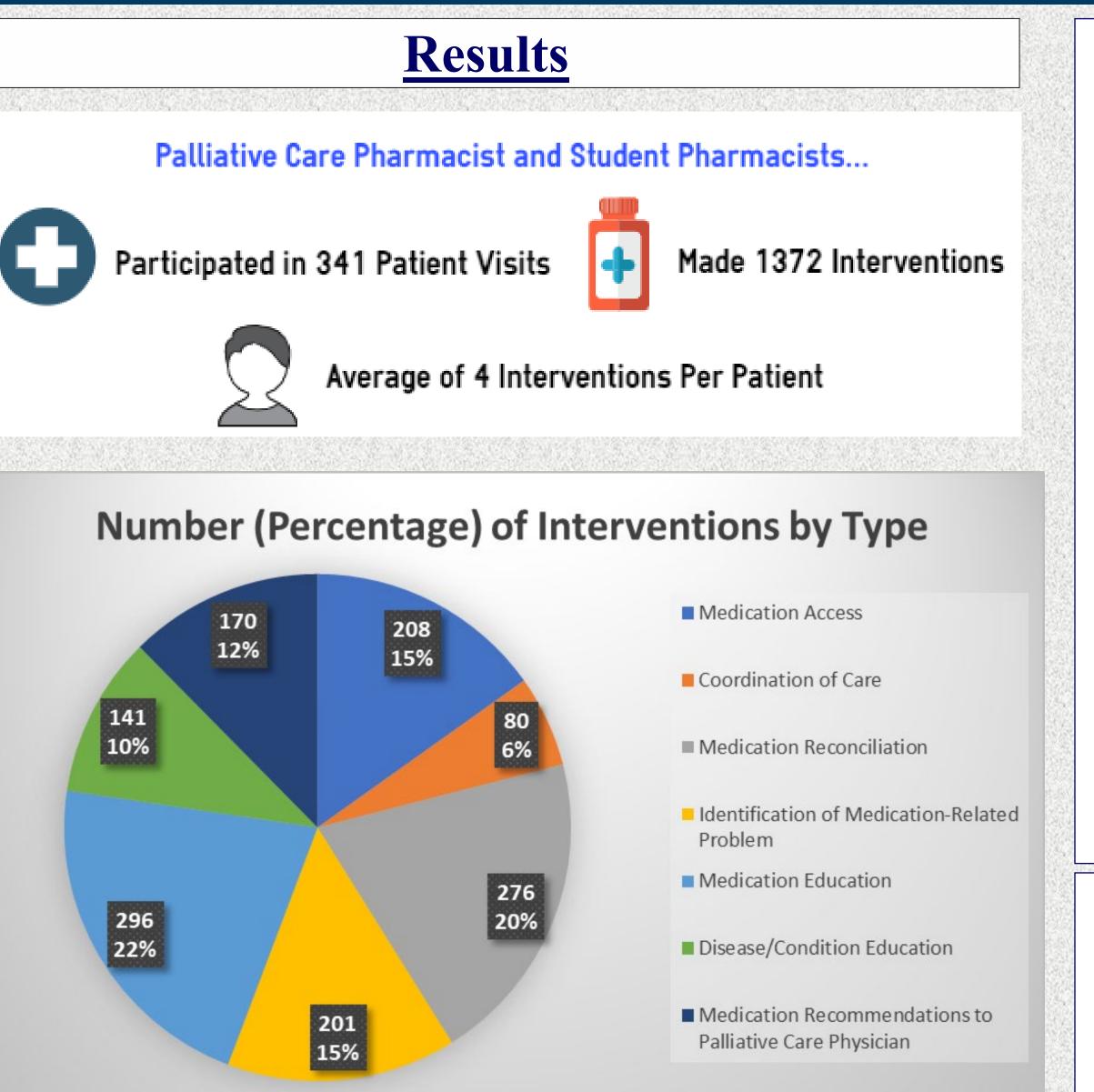
The purpose of our research is to illustrate the benefits of incorporating a pharmacist and student pharmacists into patient visits with a fellowship-trained palliative care physician in the Supportive Oncology Clinic.

Methods

- A palliative care specialist pharmacist was integrated into a half day, weekly Supportive Oncology Clinic and developed pharmacy services that included co-visits with the palliative care physician.
- A retrospective review was conducted of documented pharmacist and student pharmacist interventions for patients seen in the Supportive Oncology Clinic from January 1, 2019 to December 31, 2021.
- Over the study period, 23 pharmacy students were involved in the clinic.
- One pharmacy student, who also participated in the clinic, collected and analyzed aggregated intervention data.
- Documented interventions were quantified and categorized into intervention types to characterize pharmacy roles within the clinic.

Chisholm-Burns MA, et.al. US pharmacists' effect as team members on patient care: Systematic review and meta-analysis. Med Care. 2010; 48:923-933. Ruiz-Ramos J, et al. The Impact of Pharmaceutical Care in Multidisciplinary Teams on Health Outcomes: Systematic Review and Meta-Analysis. J Am Med Dir Assoc. 2021 Dec;22(12):2518-2526

¹University of Illinois Chicago Retzky College of Pharmacy – Rockford campus ²Mercyhealth Palliative Care Program, Rockford, IL



Authors of this study have nothing to disclose concerning possible financial or personal relationships with commercial entities that may have a direct or indirect interest in the subject matter of this presentation.

Discussion

This study attempted to characterize the full range of pharmacist and student interventions, including the lesser-known roles of clinical pharmacy in this practice setting. Such roles may include resolution of barriers to *medication* access, coordination of care activities as well as advanced medication *reconciliation* activities such as obtaining outside medical records to increase medication accuracy and clinic efficiency. In this study, there were 208 documented *medication access* interventions, largely related to completing medication prior authorizations and contacting insurance companies or pharmacies to resolve medication access issues. There were also 80 documented *coordination of care* activities, primarily consisting of pharmacist collaboration with non-palliative or outside providers regarding medication issues for chronic non-pain conditions. In this study, 56 pharmacist requests for outside records were documented for patients residing in nursing or supportive housing facilities or receiving outside oncology care or chronic non-cancer pain management.

The most common intervention types in this study reflect traditional clinical pharmacy activities with *medication education* to patients and caregivers being the most prevalent. This was followed by interventions focused on medication reconciliation and identifying and resolving medication-related problems, such as medication side effects, inaccurate medication use, and non-adherence.

Conclusion

This study describes how a palliative specialist pharmacist and pharmacy students can complement the efforts of a fellowship-trained palliative care physician in a Supportive Oncology Clinic, improving identification and resolution of medication-related issues including increased access to medications for symptom management, accurate medication use, and education to patients and families.