

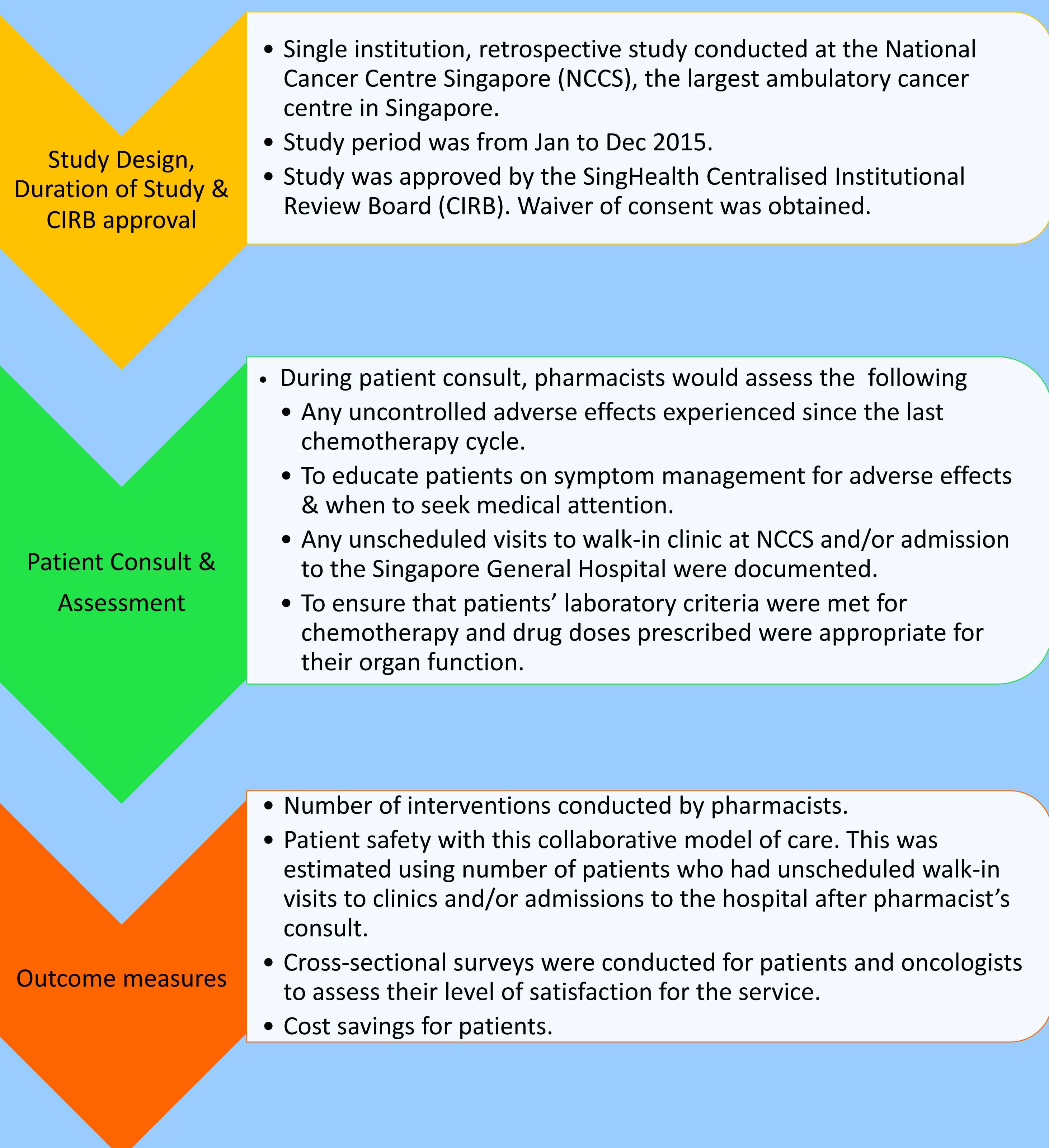
## INTRODUCTION

- ❖ Cancer patients have always been reviewed by their primary oncologists prior to the initiation of each cycle of chemotherapy. This is to ensure that symptoms experienced during the previous cycle are adequately addressed and laboratory criteria are met before proceeding with the next cycle of chemotherapy.
- ❖ However, with the increasing patient load at the outpatient clinics, it becomes a pressing issue to source for an alternative model of care. It is crucial to ensure that limited resources are best utilised, continuity of care and satisfaction of care delivery are being maintained for patients.
- ❖ Oncology pharmacists can work with oncologists, in a collaborative care model whereby patients are reviewed by pharmacists. Patients would be assessed if they are fit to receive chemotherapy and to ensure that symptoms experienced at the previous chemotherapy cycle have been adequately addressed.

## OBJECTIVE

- ❖ To investigate the safety and acceptability of a collaborative care model in ambulatory cancer patients.

## METHOD



## RESULTS & DISCUSSION

- ❖ A total of 712 patients (1293 cases) were reviewed. Interventions were made for 133 cases (10.3%) and acceptance rate was 98.5%. The reasons for interventions are shown in Fig 1. Post review, 3.6% of cases were seen at the walk-in clinic at NCCS and 3.3% required hospital admission.

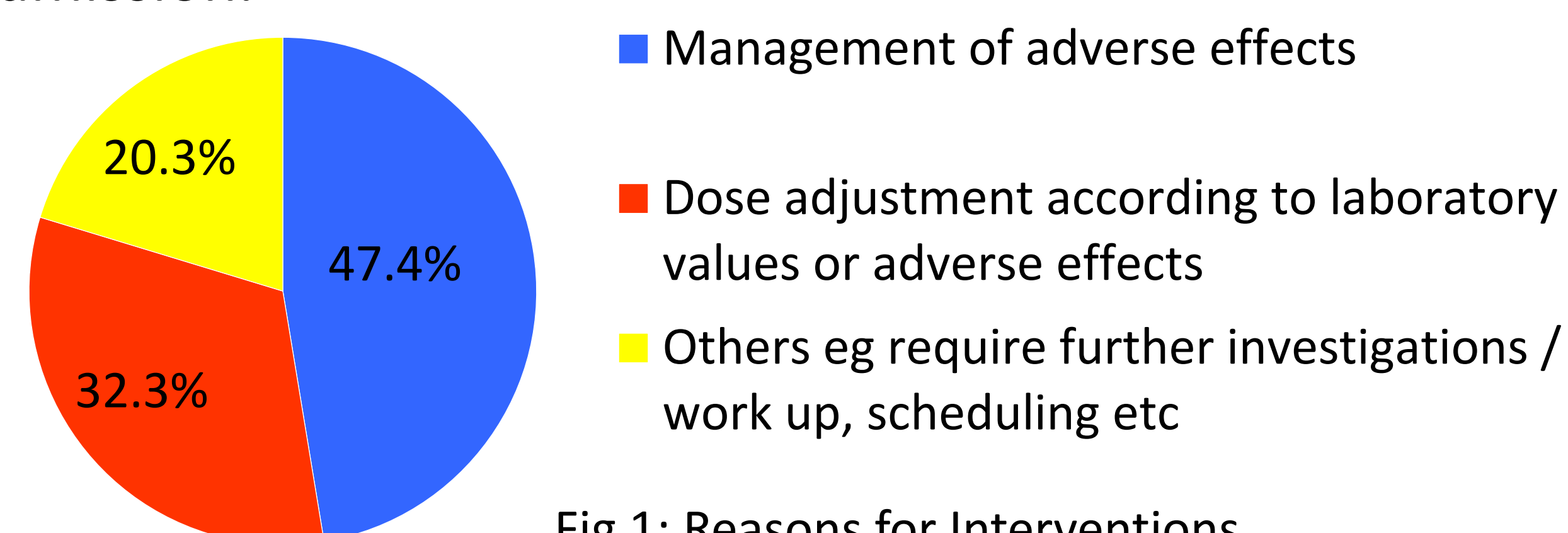


Fig 1: Reasons for Interventions

- ❖ The relatively low intervention rates (~1 in 10) implied that with appropriate screening and referral of patients by oncologists, this collaborative care model is feasible. Furthermore, the rates of hospital admission and/or unscheduled clinic visits were kept to a minimum (< 5% each).
- ❖ Besides, this model of care translated to an estimated SGD\$44,000 in direct cost savings for patients.
- ❖ Majority (92.5%) were satisfied with this model of care and similarly, oncologists (N=25) were satisfied (75% strongly agreed). Main reason cited for referral (80%) was to reduce patients' waiting time at the outpatient clinics.
- ❖ Patients would also benefit from recommendation provided by pharmacists, gain knowledge and confidence in the management of chemotherapy adverse effects.

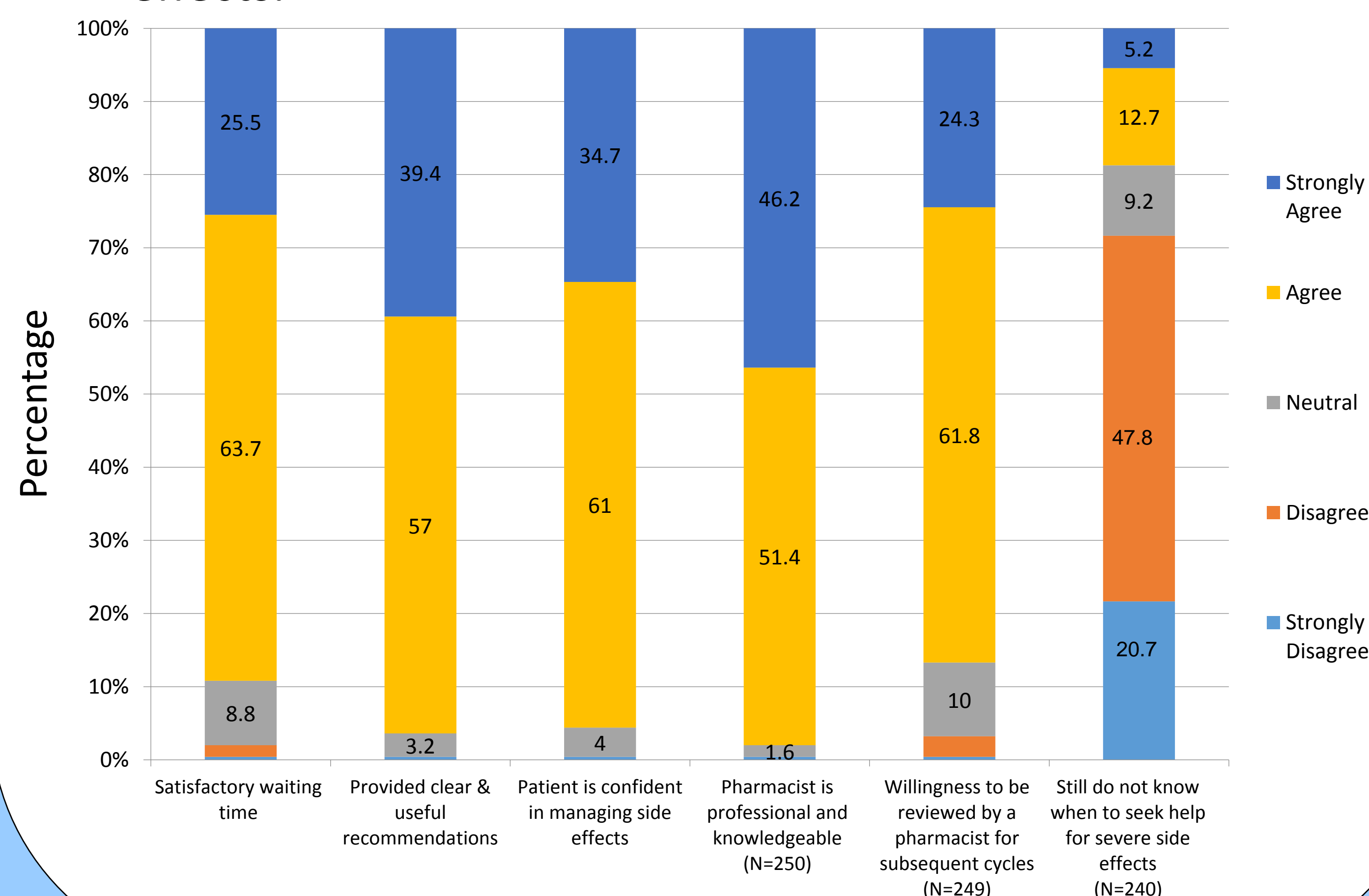


Fig 2: Survey responses from patients (N = 251)

## CONCLUSION

- ❖ The chemotherapy review clinic, the first of its kind in the local oncology setting has demonstrated that a collaborative care model for ambulatory cancer patients is not only safe but acceptable by both patients and oncologists.