



Service Priorities and Programmes
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Submitting author: Miss Wai Ka Choy

Post title: Nurse Specialist, Pamela Youde Nethersole Eastern Hospital, HKEC

To evaluate the effectiveness of Caphosol in minimizing the severity of mucositis and its associated pain in local Chinese patients undergoing autologous hematopoietic stem cell transplant in a region

Choy WK (1), Liu SY (1), Cho HY (1), Tsoi TH (1)

(1)Department of Medicine, Pamela Youde Nethersole Eastern Hospital

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Introduction

Oral mucositis is very common in patients receiving systemic chemotherapy and radiotherapy, especially stem cell transplant recipients. It frequently manifests as erythema, inflammation, ulceration and haemorrhage in the mouth and throat. The use of Caphosol in addition to the conventional mouthwash was shown to minimize mucositis and the associated pain. We reported here a preliminary experience in using Caphosol in local Chinese patients who underwent autologous hematopoietic stem cell transplant (AHSCT).

Objectives

To assess the effectiveness of Caphosol in the prophylaxis of oral mucositis caused by AHSCT.

Methodology

Data were obtained from thirteen consecutive Chinese patients (Male: 11; Female: 2; age range: 28-63) who received high dose conditioning chemotherapy (Melphalan 200mg/m²: n=12; Melphalan 140mg/m²: n=1; BEAM: n=1) followed by AHSCT over a period of 14 months (December 2011 to January 2013). Caphosol was started at a frequency of 4 times daily from the day of conditioning till the day of engraftment. Frequency was increased up to a maximum of 10 times daily according to the severity of mucositis. The severity of mucositis was objectively assessed by (1) Oral Assessment Guide (OAG)¹(score from 9-36) and the pain was assessed by (2) numeric rating scale (NRS) using a 10-point scale 2.

Result

None of the 13 patients required morphine for mucositis nor any adverse events associated with the use of Caphosol. 1. OAG: Eleven patients had no oral mucositis (score of 9). Two patients developed a maximum score of 14 at day 8 and day 7 respectively. Both of these patients required increased frequency of Caphosol but not morphine. 2. NRS score: Two patients experienced mild pain (Score of 1-3)
Conclusion: Despite the small number of patients, our early experience supported the safety and efficacy of Caphosol in local Chinese patients undergoing AHSCT. It is

easy to administer with no documented adverse events. A large scale study should be conducted to verify these preliminary findings. References: 1.Wong/Baker Faces Pain Rating Scale from Wong DL, Hockenberry-Eaten M, Wilson D, Winkelstein ML, Schwartz P (2001)Wong's Essentials of Paediatric Nursing (6th ed, p1031) St Louis: Mosby
2.<http://www.geri.u.org/uploads/painDVD/AdditionalMaterials/WongBakerPainScale.pdf>