



## Service Priorities and Programmes Electronic Presentations

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**Submitting author:** Mr Kai Him SO

**Post title:** Pharmacist, Prince of Wales Hospital, NTEC

### **Evaluation of the Multidisciplinary Bortezomib Clinic at Prince of Wales Hospital**

*So KHR(1), Mak LYB(1), Tsui SMS(1), Yau WWY(1), Chan GMC(1), Lee BSC(1), Law MF(2), Wong SMR(2)*

*(1)Department of Pharmacy, Prince of Wales Hospital, (2)Department of Medicine & Therapeutics, Prince of Wales Hospital*

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#### **Introduction**

The multidisciplinary Bortezomib Clinic was set up in Prince of Wales Hospital in 2013 aiming to manage individualized Bortezomib therapy to optimize drug safety and quality patient care. Clinical pharmacist assesses patient's disease control and tolerability towards Bortezomib-based therapy and provides recommendations on the treatment regimen to physician.

#### **Objectives**

Review of the patient management and monitoring in terms of the occurrence of adverse events is conducted for service evaluation.

#### **Methodology**

Patients who have attended the Bortezomib Clinic during 13th May, 2013 to 30th November, 2015 were included in the review. Clinical consultation notes in the Clinical Management System (CMS) and pharmacists' manual patient monitoring documentations were examined. The possible disease or therapy-associated adverse event episodes including hematological and neurological toxicity, skeletal-related events, different markers for Multiple Myeloma progression and herpes virus or other infections were reviewed by a panel of four independent oncology clinical pharmacists for identification of the possible contributing factors and comments on patient management and service improvement.

#### **Result**

A total of 27 patients were included in the review. Five patients were excluded because their clinical profiles were not accessible. Among the 22 patients reviewed (mean age 64 years), 8 patients were male (36.4%). There were a total of 382 pharmacist consultations conducted during the evaluation period. Twenty one episodes of adverse events were identified in 10 patients (45% of patients) during the

evaluation period. Adverse reaction from Bortezomib was the most common, accounting for 9 episodes (43%), followed by infections due to causes other than herpes virus (n=8, 38%). Two episodes involved herpes virus infection, one episode was related to radiation to spine and one episode involved hypercalcaemia that had led to hospitalization. The incidence of adverse reactions from Bortezomib and infections in the patients reviewed was found to be comparable to that reported in literature. None of the contributing factors was identified to be directly related to the provision of service in the panel review. Patient empowerment on the preventive measures for infection in counseling may be reinforced for service improvement.