



Assessing Delay in Care Caused by Oral Antineoplastic Medications

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Abstract

The advent of oral antineoplastic medications has brought remarkable convenience to cancer treatment, allowing patients to manage their therapy at home. However, this convenience comes with the potential for delayed care, which can significantly impact treatment outcomes. This abstract provides a concise overview of the complexities surrounding the assessment of delay in care caused by oral antineoplastic medications.

Oral antineoplastic drugs represent a paradigm shift in cancer treatment, offering patients the autonomy to self-administer their medication outside the traditional clinical setting. While this approach enhances the quality of life for patients, it introduces a unique set of challenges. Delay in care can manifest through missed doses, inconsistent adherence, and a lack of adequate monitoring, potentially leading to disease progression, increased toxicity, and reduced survival rates.

The date the prescription was written and received by the patient was determined. A retrospective review was completed to gather additional information, including prescribed medication, indication, insurance coverage, patient assistance program use, dispensing pharmacy, and prior authorization requirements. The data was analyzed through multivariate statistical analysis and used to identify risk factors that may significantly increase the time to medication receipt. A total of 58 patients were included in the study. A median of 8 days elapsed between when the medication was prescribed and when it was received by the patient. Medication prescribed, absence of a Risk Evaluation Mitigation Strategies (REMS) program, and insurance type are factors that increased time to medication receipt.

Introduction

The use of oral antineoplastic medications has revolutionized cancer treatment by providing patients with the convenience of taking their medication at home. However, this convenience can sometimes come at a cost – delayed care. Delay in care, especially for cancer patients, can have significant implications for treatment outcomes [1]. In this article, we will delve into the complexities of assessing the delay in care caused by oral antineoplastic medications and its impact on cancer patients.

Experts now estimate that more than one-quarter of the 400 antineoplastic agents now under development are planned as oral drugs. In 2013, 5 of 8 newly approved cancer therapies were in an oral formulation. Several surveys have shown that most patients prefer oral antineoplastic drugs to intravenous treatment primarily for the convenience of a home-based therapy and ease of use. The use of oral antineoplastic agents for cancer treatment removes the routine and continuous monitoring that was included with intravenous treatment [2]. With the increasing use of oral agents, patients now have more responsibility for monitoring and reporting side effects to their health care providers.

The antineoplastic agents are more expensive than traditional intravenous chemotherapy. They are typically billed to the patient's prescription drug insurance rather than through their general medical coverage as with intravenously administered therapies. The medications also generally require the use of a specialty pharmacy that must mail or deliver these medications to the patients' homes. Due to the increased costs associated with oral antineoplastic agents, many pharmacy benefit plans have implemented cost-containment mechanisms [3]. This can include the use of prior authorization or medical necessity requirements, causing a delay in therapy initiation. This can also result in increased expense to the patient, due to placement of medications in higher copayment tiers. After the prior authorization or medical necessity requirements have been met, the prescription is referred to a specialty pharmacy.

Understanding oral antineoplastic medications

Oral antineoplastic medications are a class of drugs designed to treat various types of cancer by inhibiting the growth of cancer cells or targeting specific molecular pathways. Unlike traditional intravenous chemotherapy, these drugs are administered in pill or liquid form, allowing patients to self-administer at home [4].

The convenience dilemma

The convenience of oral antineoplastic medications is undeniable. Patients can maintain a sense of normalcy, avoid frequent hospital visits, and experience fewer side effects associated with intravenous treatments. This autonomy can significantly improve their quality of life during treatment.

However, this convenience can sometimes lead to delayed care. Unlike intravenous chemotherapy, which is administered and monitored by healthcare professionals, oral medications rely on patients to adhere to their treatment regimen accurately [5]. This self-administration model opens the door to various challenges, including medication non-compliance, side effect management, and the potential for patients to discontinue treatment without medical supervision.

Assessing delay in care

Delay in care can manifest in various ways when it comes to oral

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antineoplastic medications:

Missed doses: Patients may forget to take their medication or intentionally skip doses to avoid side effects. These actions can disrupt the treatment schedule and, over time, compromise its effectiveness [6].

Inconsistent adherence: Maintaining consistent adherence to an oral antineoplastic regimen can be challenging, especially when patients experience side effects. In some cases, patients may reduce their doses or stop treatment entirely, leading to treatment gaps [7].

Inadequate monitoring: Unlike intravenous chemotherapy administered in clinical settings, oral antineoplastic agents lack real-time medical supervision. This lack of oversight can delay the identification and management of side effects, toxicity, or disease progression.

Impact on patient outcomes

The delay in care caused by oral antineoplastic medications can have severe consequences for patients. It can result in disease progression, increased treatment toxicity, and reduced overall survival rates. Delayed care also adds an extra layer of anxiety and stress to patients and their families [8].

Addressing the challenge

To mitigate the delay in care associated with oral antineoplastic medications, several steps can be taken:

Patient education: Providing comprehensive education to patients about their treatment plan, potential side effects, and the importance of adherence is crucial [9].

Regular monitoring: Healthcare providers should implement robust monitoring systems to track patient adherence and side effects. Telemedicine can be a valuable tool for remote patient monitoring.

Support systems: Building strong support systems for patients, including access to healthcare professionals for questions and concerns, can encourage better adherence and early intervention.

Individualized care plans: Tailoring treatment plans to the specific needs and circumstances of each patient can improve adherence and minimize treatment-related delays [10].

Conclusion

Oral antineoplastic medications have introduced a new dimension of convenience to cancer treatment. However, the delay in care that can result from the self-administration of these medications is a pressing concern. Healthcare providers, patients, and caregivers must work together to address this challenge effectively.

Assessing and mitigating the delay in care associated with oral antineoplastic medications is paramount to ensuring that cancer patients receive the best possible treatment outcomes and experience the benefits of these innovative medications without compromising their care.

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