

# Study explores current pharmacy practice in cardio-oncology

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A structured support system for oncology patients is one of the most important aspects during a difficult time in someone's life.

When one thinks of a cancer center, nurses and physicians are at the forefront, but a [pharmacist](#) is also essential in providing care and designing treatments for those undergoing chemotherapy.

Dr. Tom McFarlane, a researcher and clinical lecturer at the School of Pharmacy, was approached to participate in a study on the importance of pharmacists in oncology patient management.

The research is in partnership with Maria Anwar, a pharmacist at Alberta Health Services, and pharmacy resident Alisha Merali. The project focuses on cardio-oncology, which is becoming an increasingly important aspect of oncology practice. Many medications used in oncology are toxic to the heart and require close monitoring and management.

Before this study, understanding how pharmacists are integrated within cardio-oncology teams from a pharmacist's perspective has not been investigated. The findings will allow others to create a robust community of practice for cardio-oncology, thereby strengthening patient treatment.

"Pharmacists, alongside nurses and physicians, are central to the management of oncology patients," McFarlane says. "Nothing happens until pharmacists approve the medication orders from a physician. In a sense, we are the gatekeepers for oncology patients."

The study had two primary targets: to understand how pharmacists provide care to those undergoing [cancer treatment](#), and to understand the challenges pharmacists encounter when providing care.

A pharmacist's role centers around education, treatment plans and toxicity management in the complex landscape of chemotherapy. Managing toxicity in a timely manner is key to cancer treatment because the earlier side effects are caught, the severity of toxicity in patients

decreases and the longer they can stay on their targeted therapy.

In turn, the outcomes for patients are better with a pharmacist involved and helps the health-care system to work more efficiently.

"In [cancer care](#), our role is to apply our large knowledge base about [drug interactions](#) to ensure medications are used safely, that patients understand the toxicity levels they will absorb, how to manage the medications and when to let their pharmacist know when something really goes wrong," McFarlane says.

In terms of challenges, the lack of role recognition, communication difficulties and resource issues lead to poor continuity of care for [oncology patients](#). When medication changes occur from different physicians and the pharmacist is not advised, complications can arise. Consequently, there is not an easy fix for [patient care](#) to switch from reactive to proactive.

"Checking in with each patient, calling them to see if there's been any changes or issues, is helpful but we simply do not have the bandwidth to follow up regularly, especially with increased patient numbers," McFarlane says.

Creating a community of practice centered on cardio-oncology will further professional exposure for oncology pharmacists, increase quality of care for patients at smaller community hospitals that do not have a specialized cardio-oncology units and inform patients to how practice is evolving in different cancer centers.

Additionally, connecting oncology pharmacists allows them to advance care by sharing their learnings and educating one another. This will in turn increase effectiveness of treatment plans and reinforce the central role pharmacists play in cardio-oncology.

The paper, "Exploration of current pharmacy in cardio-[oncology](#): Experiences & perspectives," was published in the *Journal of Oncology Pharmacy Practice*.

**More information:** Alisha Merali et al, Exploration of current pharmacy practice in cardio-oncology: Experiences & perspectives, *Journal of Oncology Pharmacy Practice* (2022). [DOI: 10.1177/10781552221145667](#)

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