Chemotherapy in home hospitalization: a regional harmonization of chemotherapy protocols to improve the adherence of health professionals and the safety of home care

BACKGROUND

The increased incidence of cancer and its evolution towards a trend of chronicity causes an evolution of care offers for all cancer patients. In this context, the national authorities encourage the development of chemotherapy in home hospitalization in order to increase the efficiency of medical cares and to improve quality of life of patients. However, the anticancer drugs are highly toxic and administration in home hospitalization requires guidelines and strict organization.

At regional level, a working group leads a reflection on the feasibility of chemotherapy in home hospitalization considering the circuit of preparation, transport and administration of anticancer drugs and constraints related to the place and the living environment of patients.

OBJECTIVE

The objective is to produce a regional thesaurus of chemotherapy protocols which can be performed in home hospitalization.

SETTING AND METHOD

- Collection of all the work done in the other French regions on chemotherapy in home hospitalization by the working group.
- From these data, creating a listing of anticancer drugs achievable in home hospitalization at national level.
- A working group composed of oncologists, pharmacists and nurses of regional establishments met to define anticancer drugs eligible to home hospitalization in region from eligibility criteria and national listing. The group defined eligibility criteria before selecting anticancer drugs from the national listing.

RESULTS

- 8 eligibility criteria have been defined:
  - the respect of the Marketing Authorization,
  - administration of day 1 of each cycle of chemotherapy in hospital,
  - the stability of the preparation,
  - ease of administration of anticancer drugs (intravenous and subcutaneous administration),
  - duration of administration and monitoring fixed at two hours,
  - well tolerance of anticancer drug,
  - monitoring and cares after administration,
  - medico-economic criteria.

- 5 anticancer drugs were selected and validated by oncologists at regional level:
  - azacitidine, bortezomib and cytarabine (hematology indications),
  - gemcitabine (digestive and pneumology indications)
  - topotecan (gynecology indications).

- Anticancer drugs have not been selected. For example:
  - trastuzumab (monitoring period is too long)
  - vincristine and vinorelbine (venotoxicity)

CONCLUSION

For each protocol, a document is being prepared and should define the day of chemotherapy administration in home hospitalization and in hospital, clinical and biological parameters to check before the administration and who validates the administration of chemotherapy (oncologists ? general practitioners ?).

In parallel to the thesaurus, procedures must be written in order to guarantee the quality and safety of the care of these patients in home hospitalization.