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A Wake-up Call to Oncology Pharmacists

By Selma R. Schimmel

Recently I had the opportunity to deliver the keynote address to an international audience of oncology pharmacists at the Sixth International Symposium on Oncology Pharmacy Practice (ISOPP) in Washington, D.C. Speaking as a fifteen-year cancer survivor and advocate, I shared my own experience with breast cancer at the age of 28. I reflected on my own difficult experience with chemotherapy—I had severe nausea and vomiting in the days before the 5-HT₃ antiemetics were available.

I did not need to remind my audience that chemotherapy is one of the most frightening aspects of cancer treatment for patients, who often have many questions about side effects, drug interactions, and clinical trials, as well as issues related to insurance reimbursement, co-payments, and Medicare. Unfortunately, most patients are unaware of, or are not readily offered access to, one particularly valuable source of education and support: the oncology pharmacist.

A pharmacist trained in oncology is a vital resource to patients. Direct access to an oncology pharmacist encourages a greater sense of security about treatment and a

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better understanding of advances in research. Patient-pharmacist relationships can strengthen patient compliance with treatment. As patients struggle with issues like fatigue, anemia, neutropenia, hair loss, nausea, vomiting, sexuality, fertility, pain, infection, gastrointestinal and nutritional problems,

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bladder irritation, taste alterations, smell associations, and anticipatory effects of chemotherapy, the oncology pharmacist can offer knowledgeable explanations and management: support to help ease patient discomfort and anxiety.

The oncology pharmacist is also an important resource for physicians, who often have less time and more patients, especially in today's managed health care environment. For example, oncology pharmacists can play a central role in evaluating the drugs that cancer patients may already be taking for other medical conditions prior to starting chemotherapy.

One frustration among oncology pharmacists is their lack of

recognition as critical members of the cancer care team. However, their role will increase only if oncology pharmacists step out from behind the scenes into the forefront of oncology care to create greater awareness of their impact on the quality of oncology care. Some possible actions include:

- A CME pharmacology program directed to physicians and pharmacists.

- Development of tools targeted to physicians and other clinicians on how to best use the expertise of the oncology pharmacist. For example, an information packet directed to physicians and other clinicians could offer tips on patients' most common pharmaceutical concerns, drug interactions, and other issues.

- Increased oncology pharmacist involvement in economic issues such as FDA approval of drugs, off-label indications, and payer reimbursement.

If oncology pharmacists wish to expand their patient-oriented focus and community practice setting, they must put forth greater effort to reach today's medical consumers. Patients readily turn to the Internet to gather data, information, and misinformation. Where is the oncology pharmacists' web site? A toll-free information hotline? Educational brochures in physician offices, treatment centers, support, and advocacy organizations?

I strongly encourage oncology pharmacists to become more active in marketing their services to cancer patients (and physicians). Oncology pharmacists have a tremendous opportunity to take a leadership role in development of cancer clinical care and management in the 21st century. ☐