

## INTRODUCTION

ONCOLOGY PATIENTS frequently self-administer traditional, complementary, and alternative medicines (TCAM), yet physicians' interviews and reports often fail to ask about this.



## OBJECTIVES

INDIRECTLY explore how the cancer patients treated in our institution use TCAM. Subsequently propose oncological patient-management plans that match their needs.

## METHODS

RETROSPECTIVELY ANALYSE the questions which healthcare professional asked the oncology department's clinical pharmacist about TCAM in 2016.

Anonymized patient data included:

- adult or pediatric status
- type and name of TCAM used
- TCAM indication, as described by the patient
- TCAM supplier
- clinical pharmacist's recommendation concerning treatment continuation and rationale

# D&C

## Discussion and Conclusion

CANCER PATIENTS perceiving unmet support or care needs, or seeking new anti-tumor treatments, may self-administer TCAM.

Self-administration should be asked about frequently in order to reduce the inherent risks of TCAM (drug interactions or toxicity). The ethical, professional, and financial challenges of TCAM have yet to be explored fully.

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## ESSENTIAL questions to ask during a patient interview

- ★ Are you taking any TCAM to aid your recovery?
- ★ Can you describe them precisely? It would be great if you could bring them to our next consultation.
- ★ What benefits do you feel they bring you? Which symptoms are you trying to alleviate?
- ★ Where did you manage to procure your TCAM? In a pharmacy? On the Internet?
- ★ Are your TCAM working effectively? Are you happy with them?

## RESULTS

HEALTHCARE STAFF asked the clinical pharmacist 110 questions

13 children



97 adults

32

Questions involved patients self-administering combinations of multiple TCAM

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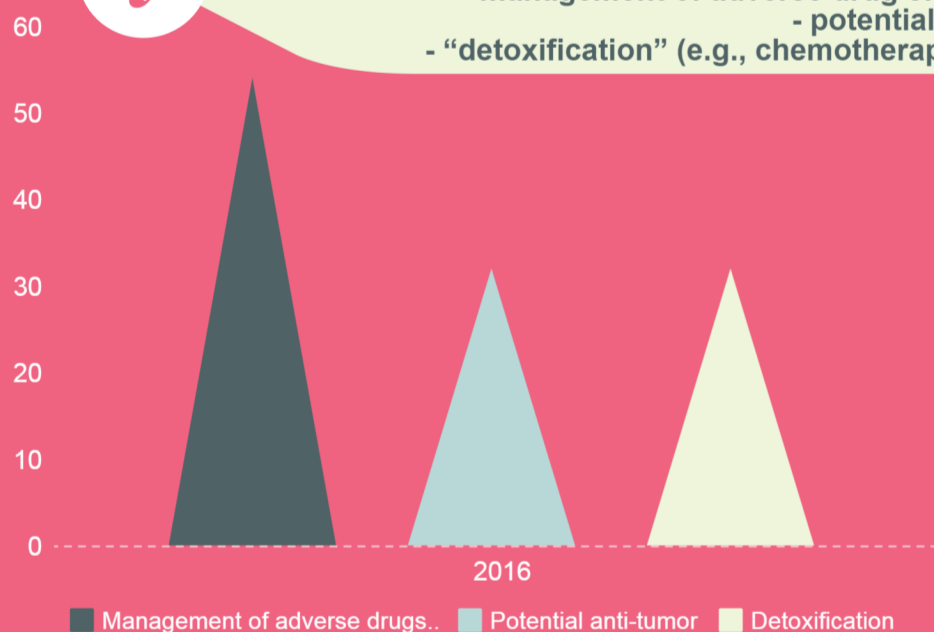
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2 patients were self-administering > 20 TCAM per day

The three main patient-identified indications requiring TCAM were:

- management of adverse drug effects (e.g., nausea) (n = 54)
- potential anti-tumor activity (n = 32)
- "detoxification" (e.g., chemotherapy drainage therapy) (n = 32)



Only 44% of the TCAM used proved acceptable for continuation. Of these, 10% were virtual placebos. The main reasons for discontinuing the use of TCAM WERE:

- 11% Drug-drug interactions
- 8% Unacceptable risk of subsequent adverse reactions
- 10% Toxicity of the TCAM themselves (e.g., should not be ingested)



Most TCAM were bought over the counter in pharmacie (n = 46). TCAM-provider details were missing in 33% of cases (n = 36). Other TCAM were of diverse origins.