

Safe Prescription of Systemic Antineoplastic Treatment in Oncology: Integrative Literature Review

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ABSTRACT

Systemic antineoplastic treatment is used in a wide variety of patients with cancer and can be administered for potentially curative or palliative purposes. Although this treatment has a real benefit, adverse drug reactions in patients with cancer are still very common, leading to delays in subsequent prescribed cycles, non-adherence to treatment, and additional healthcare costs for toxicity management. This study aimed to synthesize knowledge about the systemic antineoplastic treatment toxicity profile to be adopted as a parameter for safe prescription. It is intended to obtain evidence that can improve the quality and safety of systemic antineoplastic treatment prescription, in order to provide information on treatment toxicity as well as risk management strategies in this context. This is an integrative review carried out in the EMBASE, LILACS, and PubMed databases, from 2015 to 2019. The evaluation of the individual methodological quality of the primary studies included in the sample was performed using the Joanna Briggs Institute. Eight studies were included, of which 5 addressed adverse events related to systemic antineoplastic treatment, including 4,970 patients treated with immunotherapy, target therapy, and chemotherapy. One study evaluated the safety of prescribing antineoplastic agents and 2 studies addressed pharmacovigilance and risk management by assessing treatment-related adverse effects. Chemotherapy, target therapy, and immunotherapy have different toxicity profiles. Strategies for systemic antineoplastic treatment prescription safety, such as early detection and monitoring of associated adverse events, help to minimize the damage caused by adverse reactions. A multidisciplinary approach is important to recognize, report and manage the risk of treatment. The evidence from the studies included in this integrative review suggests that assessment of treatment-related adverse events as well as risk management strategies should be considered to improve the quality and safety of the systemic antineoplastic treatment.

Keywords: Antineoplastic agents, Immunotherapy, Drug-related side effects and adverse reactions, Patient safety

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