

Oral chemotherapy in Germany and Austria: The role of the community pharmacy

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Background

Provision with oral anticancer drugs is organised differently in different countries. Each chain of distribution comes with different tasks for community pharmacies that in turn require different skills. These are not always clear to physicians, patients - and even pharmacists.

Method

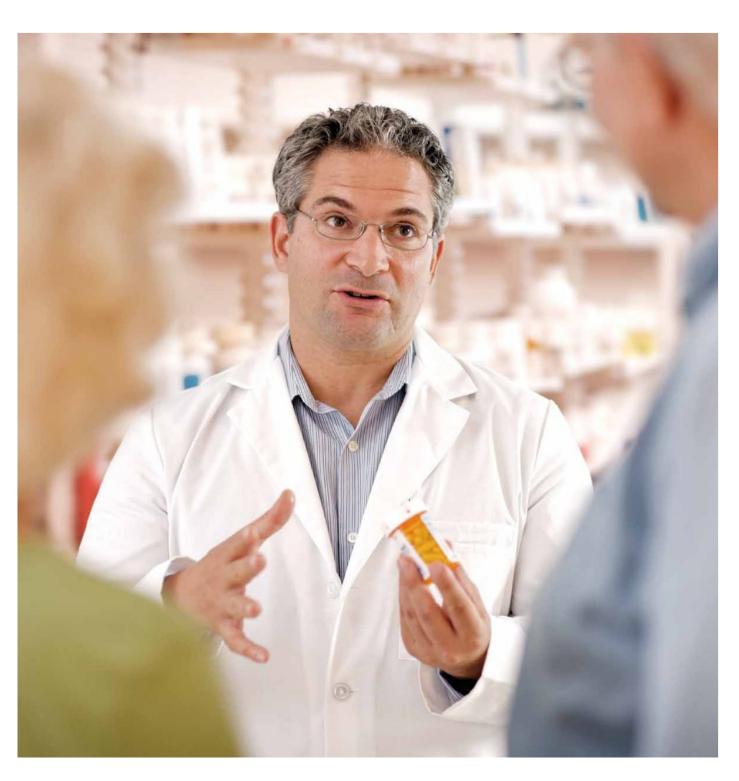


We compared the chains of oral antineoplastic drug distribution in Austria and in Germany as of February 2014.

Results

In both countries, there are fundamental differences in the logistics of parenteral versus oral anticancer therapies (Fig. 1). In Austria, oral antineoplastic drugs are prescribed mainly by hospital physicians, as there are hardly any ambulatory oncologists. In Germany, prescriptions of oral antineoplastic therapy are issued mostly by one of many ambulatory oncologists (Fig. 2). In both countries the prescriptions are filled by a community pharmacy. Monitoring of side effects is done in day-care clinics of hospitals in Austria and at the oncologist's practice in Germany. However, in oral, unlike in parenteral, anticancer therapy, the physician encounters the patient a great deal less frequently. Thus, the community pharmacist plays an important role in i) counselling the patient at the beginning of and throughout the treatment, e.g. about treatment plans, drug interactions and supportive therapy, and ii) to inquire regularly about signs and symptoms of adverse drug effects in order to decide whether or not to refer the patient to the physician. While German pharmacies are supplied with oral anticancer drugs wholesale like with any other drug, Austrian pharmacists are supplied either wholesale or by the manufacturer, depending on the drug (Fig. 2). With the necessary skill, the pharmacist is able to contribute significantly to patient safety and medication adherence.

Yet, until now the organisational, professional and



communicational skills are not fully provided by pharmacists' training and have to be acquired in part by postgraduate education. This can be stated for both countries, though the differences in the distribution chain may require a slightly different curriculum.

Fig. 1: Parenteral and oral cancer therapy compared

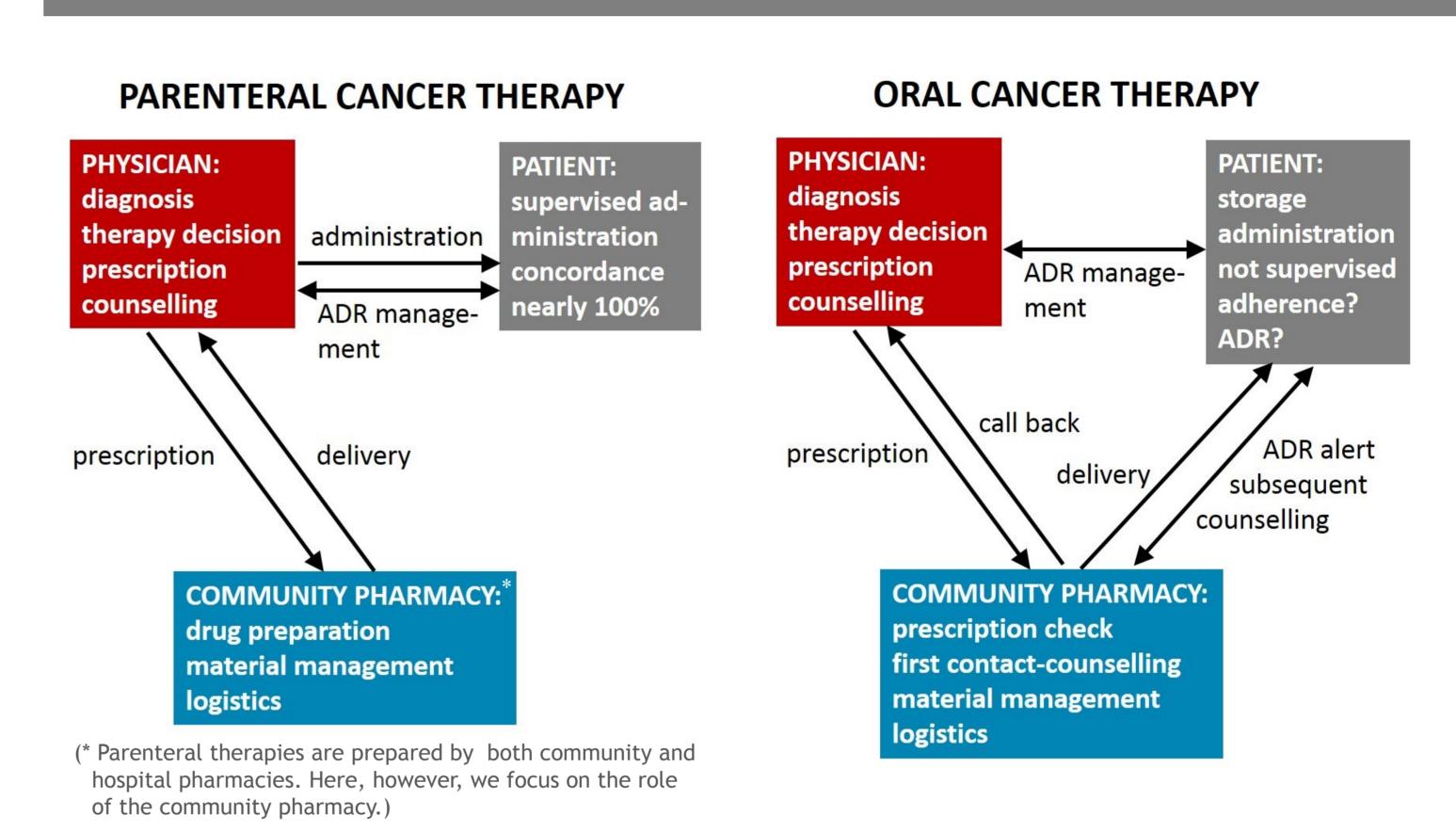
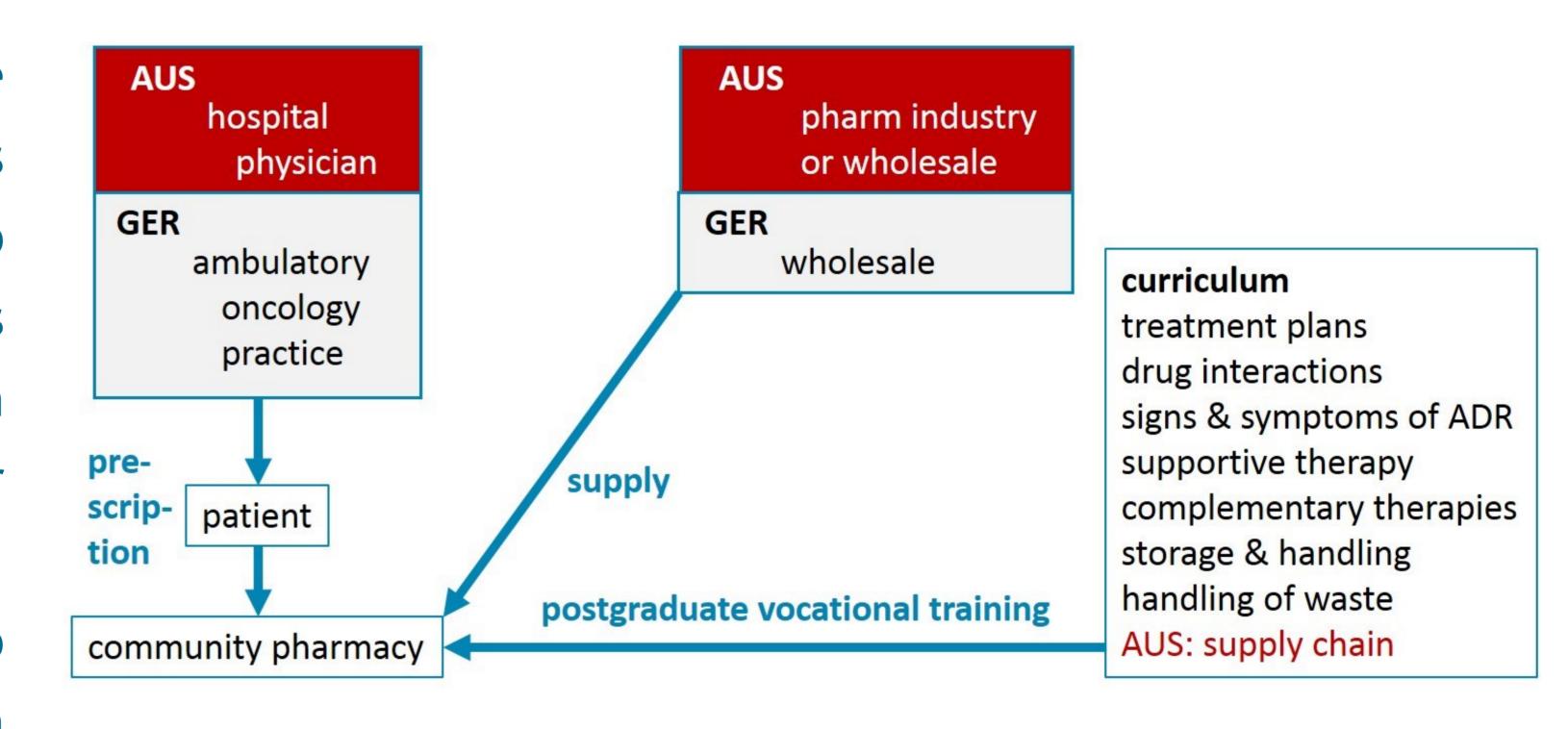


Fig. 2:Differences between Austria and Germany



Conclusion

Both systems are similar in regard to the distinguished role of the community pharmacist for patient safety and medication adherence requiring extensive postgraduate education in the field of oral anticancer therapy. They differ mainly on the medical sector and in the supply chain of oral anticancer agents. Therefore, a comparison is a great chance to learn from each other.