

1. Tumori. 2013 Jan-Feb;99(1):35-8. doi: 10.1700/1248.13785.

Impact of use of oral anticancer drugs on activity of Italian oncology practices: results of a survey conducted by the Italian Society of Medical Oncology (AIOM).

Gori S(1), Di Maio M, Pinto C, Alabiso O, Baldini E, Barbato E, Beretta GD, Bravi S, Caffo O, Canobbio L, Carrozza F, Cinieri S, Cruciani G, Dinota A, Gebbia V, Giustini L, Graiff C, Molino A, Muggiano A, Pandoli G, Puglisi F, Tagliaferri P, Tomao S, Lunardi G, Venturini M; AIOM Working Group "Interaction with Regional Sections" (2009-2011).

Author information:

(1)Medical Oncology, SM della Misericordia Hospital, Azienda Ospedaliera, Perugia, Italy. stefania.gori@tin.it

**AIMS AND BACKGROUND:** In recent years, the number of oral anticancer drugs used in clinical practice has rapidly increased. The Italian Society of Medical Oncology (AIOM) conducted a survey to describe the impact of the use of oral anticancer drugs on the daily activity of Italian oncology practices.

**METHODS AND STUDY DESIGN:** A survey questionnaire was distributed to the coordinators of the regional sections of AIOM. A 6-month period was considered, from January 1, 2010 to June 30, 2010. The survey addressed (1) quantitative aspects of the use of oral anticancer drugs; (2) practical aspects in the management of patients treated with these drugs; (3) issues related to treatment costs and reimbursement procedures.

**RESULTS:** Thirty-six questionnaires were received from institutions distributed throughout the Italian territory. Oral anticancer drugs (both chemotherapy and molecularly targeted agents) accounted for a significant proportion (17%) of prescribed treatments. Among the responding institutions, there were different dispensation procedures of oral drugs to patients: drugs were dispensed by the pharmacist (57%) or directly by the medical oncologist (23%) or nurse (20%). The medical oncologist played a major role in the communication with patients (73% alone and a further 24% in cooperation with other professional figures) and was the point of reference in the event of side effects in 97% of cases. In most cases, the reimbursement of drug costs was separated ("File F" procedure) from the flat fare received by the hospital for outpatient visits or day-hospital access.

**CONCLUSIONS:** Optimal organization of oral anticancer treatment warrants the cooperation and integration of multiple professional figures. At least three figures are involved in patient management in the hospital: the medical oncologist, the nurse, and the hospital pharmacist. Oral anticancer treatments are associated with specific reimbursement issues: in the majority of cases, the cost of the drug is reimbursed separately from the cost of patient access.

PMID: 23548997 [PubMed - indexed for MEDLINE]