A Structured Nursing Intervention to Address Oral Chemotherapy Adherence in Patients With Non-Small Cell Lung Cancer

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With the use of oral chemotherapies rapidly expanding in oncology practice (Halfdanarson & Jatoi, 2010), an increasingly significant concern involves patient medication adherence when these oral agents are self-administered at home (Given, 2009; Moore, 2007, World Health Organization, 2003). One challenge of oral chemotherapy is the rate of medication adherence to oral anticancer regimens, which varies widely from 16%–100% in adults (Ruddy, Mayer, & Partridge, 2009). Common patient problems related to oral chemotherapy adherence include improper administration, inadequate monitoring, and adverse side effects (Banning, 2009; Decker et al., 2009; Given, Spoelstra, & Grant, 2011; Goodin, 2007; Halfdanarson & Jatoi, 2010; Hartigan, 2003; Haynes, Ackloo, Sahota, McDonald, & Yao, 2008; Moore, 2007; Ruddy et al., 2009). Suboptimal or improper self-administration reduces treatment efficacy and increases toxicity (Hartigan, 2003; Maloney & Kagan, 2011; Partridge, Avorn, Wang, & Winer, 2002; Ruddy et al., 2009; Wood, 2012) and leads to treatment delays, changes in treatment, and premature death (Given et al., 2011). Patient self-administration of oral chemotherapy also increases the risk of errors and changes the way patients are monitored (Goodin, Aisner, Bartel, & Viele, 2007; Goodin et al., 2011). Older adults with cancer have additional adherence and safety risks because of age-related physical changes, comorbid conditions, polypharmacy, and drug interactions (Maloney & Kagan, 2011).

As reported by Weingart et al. (2008), significant patient safety concerns exist related to medication adherence, including safe handling (Goodin et al., 2011) and how patients manage missed doses and adverse events. To address these concerns, guidelines were published by the American Society of Clinical Oncology and the Oncology Nursing Society (Neuss et al., 2013; Weingart et al., 2012) to standardize the approach to oral chemotherapy administration by educating healthcare providers. Patients require similar education and support, including monitoring of medication procurement.