POSTER ABSTRACT

Self-Administration Of Subcutaneous Bortezomib At Home In Cancer Patients With Multiple Myeloma. Patients And Health Professionals Perspectives And Organizational Aspects, In A Mixed Methods Study

22nd International Conference on Integrated Care, Odense, Denmark, 23-25 May 2022

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Introduction: Cancer treatment has improved significantly over the last decades. The more gentle and specialized treatment has led to more long-term survivors with lifelong treatment needs. As specialized treatment of certain cancer diseases has been centralized, many patients have to spend a lot of time transporting themselves to the hospital. Consequently, it might be difficult for patients to return to a normal everyday life. Thus, it seems relevant to evaluate the possibility of reducing patients' visits to the hospital e.g. by administering the treatment in the patients’ home, which seems particularly important for treatments given frequently over a long period.

Aims, Objectives, Theory or Methods: The aim of the study was primarily to examine the perspectives of patients and healthcare professionals of self-administration of SC Bortezomib in the home of the patients with multiple myeloma (MM) and to highlight the benefits and challenges to this, and secondly to assess organizational aspects.

We conducted a mixed-methods study, including both qualitative and quantitative methods. Data collection consisted of semi-structured interviews of the patients (n=10) - and relatives - along with a focus group interview of involved staff (n=5). Quantitative data was acquired from time registration (n=10) performed by patients and nurses.

Highlights or Results or Key Findings: Overall, patients and healthcare professionals were pleased with self-administration. Patients underlined the value of not having to transport themselves to the hospital and the healthcare professionals experienced great value of the time released for patients with greatest needs.

Nurses and physicians generally agreed on possible candidates and there were no need of relocating treatments to the hospital. We found the timing of the invitation to participate of importance for both patients and healthcare professionals.

We found self-administration to be timesaving for both patients and nurses. Especially for the patients, savings were remarkable. Further, our analysis revealed that delivering the medicine to the patients was slightly more expensive than administration at the hospital. This was primarily due to the high cost of delivery.

Patients had a saving of 235 minutes and nurses 20 minutes per average per administration.

Conclusions: Vi fandt selvadministration af Bortezomib beneficial for både patienter og sundhedspersonale. Selvadministration var muligt rent organisatorisk. Der er dog behov for at finde
en billigere løsning til udbringning af medicinen til patienterne, således at det også økonomisk set bliver en fordel for sundhedsvæsnet.

Implications for applicability/transferability, sustainability, and limitations: We found that all patients; men and women, young and old, were able to complete the self-administration, so despite the group of patients predominantly being frail and old, self-administration was successful. We therefore believe that it is possible to expand self-administration to more patient groups, but future studies are needed to clarify this.