

INTRODUCTION

- Constant increase in chemotherapy production activity
- Organizational constraints

Objectives: Implement Standard Doses (SD) to improve productivity and quality of patient management

MATERIALS AND METHODS

Selection of molecules

Prescription frequency (> 500/year)

Definition of SD

- Retrospective study of prescriptions over 1 year
- Selection of SD with a variation of +/- 10% of the dose taking into account the feasibility of the volumes to be withdrawn
- Maximum 6 bands covering >50% of production



Validation by prescribers



Parameterization on CHIMIO®

(Standard Dose module)

3-month balance sheet

RESULTS

- Selected molecules

14 CYTOTOXICS

5-Fluorouracil, Bortezomib, Cisplatin, Cyclophosphamide, Cytarabine, Docétaxel, Doxorubicin, Epirubicin, Gemcitabine, Irinotecan, Oxaliplatin, Paclitaxel, Vincristine, Vinorelbine



9 ANTIBODIES

Bevacizumab, Cetuximab, Daratumumab, Nivolumab, Pembrolizumab, Rituximab, Rituximab SC, Trastuzumab, Trastuzumab SC

- The mean number of established bands per molecule was **3,32 [1;5]**
- Theoretical production coverage by SD estimated at **57%**

Balance sheet at 3 months: the production coverage obtained by the SD is **32%**



- The average SD prescription rate was **64%**
- **+100%** for 8 anticancer drugs, including 7 antibodies and 1 cytotoxic
- **-20%** for 3 cytotoxics : Docetaxel, Oxaliplatin, Paclitaxel

CONCLUSION

- Readjustment of the SDs was made in agreement with the prescribers :
 - Reduced to +/- 3% and 5% for Docetaxel, Oxaliplatin and Paclitaxel
 - Increase in the DS prescription rate of **20% to 90%**
 - Decreased to +/- 8% for other cytotoxics
 - Increase in the average DS prescription rate of **64% to 71%**
- The good adherence of doctors to standard doses at the time of prescription will allow later on to set up manual and automated early production campaigns.