

# News LETTER



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## Farewell Message from the President

Dear ISOPP member,

As I write this, my last message as ISOPP President, on a cold, grey winter's day in the UK, my thoughts drift to Malaysia and the up-coming ISOPP X Symposium in KL. This promises to be an excellent meeting, and I would like to take this opportunity to thank all of those who have given their time, energy and expertise to provide us with a top-quality scientific programme.

It is inevitable that, in their final newsletter, an out-going ISOPP President will reflect on their two year term of office. For me, the first thing to say is that leading ISOPP over the past 2 years has been a privilege. I have benefited from both the kindness and wisdom of my Secretariat and Committee Chair colleagues, and I have also had the pleasure of welcoming new colleagues to ISOPP membership. Over the last 2 years I have had the fortune to represent ISOPP at oncology pharmacy meetings around the world, including Spain, Lebanon, France, Malaysia, Italy, Thailand, Canada, UEA, Australia and the USA. Again, I thank colleagues from these countries for their warm hospitality during my visits.

How has ISOPP changed over the last 2 years? Well, I think the up-turn in activity from the ISOPP Committees has continued. This is exemplified by the excellent programme for ISOPP X developed by the Education Committee, the review of submitted abstracts by the Research Committee, another round of awards from the Membership Committee, new developments of the ISOPP website thanks to the Publication Committee and last, but not least, the launch of the ISOPP Standards by the Standards Committee.

A key change we have introduced is the linking of member's fees to their salary or "salary-banding". This system was introduced to make ISOPP a fairer and more accessible society for those who are passionate about oncology pharmacy. In approving this change, the ISOPP membership also approved postal voting, which should make ISOPP more productive and more responsive in the future. In further attempts to make ISOPP a more progressive society which can respond to the needs and wishes of its members, a small group comprising the Past President and current Secretariat members have reviewed the ISOPP Rules. The proposals arising from this process require further discussion, but at least progress has been made.

In January, we heard that the Journal of Oncology Pharmacy Practice had achieved indexing by Medline. This development gives ISOPP a highly prestigious medium to communicate scientific and practice – related advances to the membership and beyond. I hope like me, you have also enjoyed reading the excellent contributions by members in the ISOPP Newsletter – again, always published on schedule.

What of the future? Like any society, the future success of ISOPP is dependent on the effort and contribution of its members. I urge all ISOPP members to get involved in the society, to join a Committee, and, most of all, to contribute! The recent ballot has delivered a very capable and committed Secretariat, and I hope that all ISOPP members will support them in taking the Society forward over the next 2 years.

Finally, I would like to offer my sincere thanks to the current ISOPP Secretariat, the ISOPP Committee Chairs, to CMC,



the ISOPP management company, and to CHIC, the ISOPP website host. Most of all, I want to thank the ISOPP members, both for their support and for their votes on key issues which have changed the Society for the better.

I look forward to meeting as many members as possible in KL.

Yours

Graham Sewell, ISOPP President

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## Editorial

It is only a few weeks away to our biennial conference and the excitement is building. The scientific programme looks extremely interesting (you can view it on-line at [www.mps.org.my/ISOPP\\_X/](http://www.mps.org.my/ISOPP_X/)) thanks to Helen Leather and the Scientific Committee and the social programme promises to be full and entertaining thanks to the local Malaysian Organising Committee. I do hope that you will be joining me there. In the last newsletter I mentioned my trip to Penang last year. Saad Othman (our soon to be President) includes a report on that meeting in this edition of the newsletter. Also included is a report on the 2005 MASCC meeting and the more recent 2006 BMT Pharmacists meeting. At all three meetings ISOPP members were involved in speaking or presenting their work. We certainly do get around. So far this year we have 61 new members from 15 countries. Welcome to our society. The election this year for Secretariat members is now complete and the new Secretariat will be inducted during ISOPP X. There is no better way to support ISOPP than to run for a Secretariat position. This does commit members to a regular work schedule and not everyone is able to offer this type of support. However, all members can become more involved in ISOPP activities by joining one of ISOPP's committees – Research, Publications, Membership and Finance, Education and Standards. Just contact the Committee Chair and state your interest. See you in KL.



**Jill Davis**

## ISOPP X

Approximately 400 participants from Algeria, Australia, Austria, Belgium, Canada, China, Czech Republic, Denmark, Finland, France, Germany, Greece, Hong Kong, Hungary, Iceland, Iran, Ireland, Italy, Japan, Kuwait, Lebanon, Luxembourg, Malaysia, Mauritius, Netherlands, New Zealand, Poland, Russia, Saudi Arabia, Singapore, Sudan, Sweden, Taiwan, Thailand, UAE, UK and USA will be meeting in Kuala Lumpur, Malaysia during April 3-6 to communicate oncology pharmacy practice.

# Malaysia: First National Oncology Pharmacy Conference

The 1st National Oncology Pharmacy Conference was successfully held in Malaysia at the City Bay View Hotel, Penang, from the 5th to 7th September 2005. As somebody who had initiated Oncology Pharmacy Practice in Malaysia back in 1990, this conference means so much to me. This conference was jointly organized by the Pharmaceutical Services Division, Ministry of Health, Malaysia and the Malaysian Pharmaceutical Society. About 90 pharmacists from the government and private hospitals, mainly those who are practicing oncology pharmacy, attended this conference. Considering oncology as a new area of specialization in pharmacy, the number of participants gathered was something that we are very proud of. Although most of the participants were new to the oncology pharmacy practice they were very enthusiastic.

The theme of the conference was Perspectives in Oncology Pharmacy Practice. The objectives of this conference were to increase awareness of pharmacist's clinical role in the management of cancer and to increase the pharmacist's knowledge in the recent advancements of cancer therapy. The Organizing Committee had invited two speakers from ISOPP, ie. Jill Davis, ISOPP Secretary, from Australia and myself as the President-Elect of ISOPP.

The conference started off on the 5th September evening with a Continuous Pharmacy Education (CPE) session entitled Hypercalcemia of Malignancy. Ms. Hasnah Ismail, the Principal Assistant Director of the Pharmaceutical Services Division, Ministry of Health, Malaysia officially opened the conference on 6th September 2005.



**Saad Othman, President-Elect ISOPP addressing the conference on "the role of Herbs in Cancer Treatment"**

On the 2nd day of the conference, a total of 8 lectures were delivered by distinguished speakers, all being practicing oncologists, radiotherapist and clinical pharmacy lecturers. The topics covered ranged from issues relating to the challenges and future of oncology pharmacy in Malaysia, role of clinical pharmacists in managing and preventing chemotherapy complications as well their involvement in clinical trials and management of hematological, breast and lung cancers.

The 3rd day of the conference was filled with another 9 lectures including role of herbs in cancer treatment, colorectal cancer, paediatric cancers, radiotherapy, therapeutic monitoring of methotrexate levels, targeted cancer therapy and safety issues in oncology treatment. A special lecture on PIC/S- Guide to Good Practices for Preparation of Medicinal Products in Pharmacies was also delivered by a speaker from the Malaysian Pharmaceutical Control Bureau.

Jill herself had delivered three lectures; 1) Practical Issues to Consider When Checking Chemotherapy Orders; 2) Managing toxicities, nausea and vomiting and mucositis 3) Clinical Trials in



**Participants at the One day Post conference workshop**

Oncology. I myself had delivered two lectures; 1) Challenges and Developments in Oncology Pharmacy Practice and 2) The Role of Herbs in Cancer Treatment.

At the end of the conference, as the Chairman of ISOPP X, I had announced the coming ISOPP X Symposium and distributed about 100 copies of the ISOPP X Second Announcement and Provisional Program. It is also hoped that most of the participants of this conference will register for our ISOPP X.

The conference was officially closed by Mr. John Chang, the President of the Malaysian Pharmaceutical Society.

The following day, on the 8th September a post-conference workshop was held. It was conducted by Jill Davis, Miss Adliah, from Universiti Kebangsaan Malaysia, and Assoc. Prof Zuraidah, from Universiti Sains Malaysia, another ISOPP member. All together there were 30 participants who attended this one-day workshop.

Apart from a series of informative lectures, the event also saw an active participation of pharmaceutical companies dealing with oncology drugs. The participants of the conference had an opportunity to update their knowledge on new anticancer drugs. In conclusion, the conference has achieved its aim to promote active involvement of

pharmacists in the management of cancers as a move to establish the oncology pharmacy practice in Malaysia.

Lastly, the conference itself was a reflection of the progress made in oncology pharmacy practice in Malaysia and also a display of concerted efforts made between the universities, the Ministry of Health and the Malaysian Pharmaceutical Society. ■

## JOPP in Medline

The Journal of Oncology Pharmacy Practice commenced publication in 1995, following recognition by Barry Goldspiel, the founding editor, that there was no single pharmacy journal solely dedicated to cancer practice that oncology pharmacists could "call their own." (see JOPP Vol. 1, Issue 1, 1995 p.7).

Outstanding news for ISOPP members is that our journal The Journal of Oncology Pharmacy Practice (JOPP) is now being indexed for Medline. This reflects the high quality of articles published in the journal and the unflinching hard work of the Editorial Board, in particular Barry Goldspiel and Graham Sewell.

Inclusion in the Medline database gives potential authors additional reason to submit articles to JOPP. So if you have any unpublished manuscript please don't hesitate to submit it.



Information can be found at JOPP's website: [www.oncologypharmacypractice.com](http://www.oncologypharmacypractice.com)

## ISOPP Election results

Congratulations to the New Secretariat Team who will take over the running of ISOPP at the end of the ISOPP X meeting in KL, Malaysia. The successful members will join new President Saad Othman. They are: President-Elect – Carole Chambers; Secretary – Kim Stefaniuk; Treasurer – Terry Maunsell; Members – Per Hartvig; Jude Lees; Johan Vandembroucke; John Wiernikowski. Jude Lees was appointed for a full two year term.

This meeting was held in Geneva, Switzerland from June 30 – July 2, 2005.

A number of specific Study Group meetings were held: Oral Care; Patient and Professional Education; Infection; Quality of Life; Growth Factors; Paediatrics; Fatigue; Palliative Medicine; Mucositis; Antiemetics; Rehabilitation; Psychosocial.

There were 3 Keynote /Plenary Sessions and 5x 2 parallel sessions.

206 Posters in 27 Streams were displayed with a number from ISOPP members.

There were also 5 Sponsored Satellite Education Sessions.

For more information re MASCC visit their website at <http://www.mascc.org/>

For complete abstracts see Supportive Care in Cancer Vol 13 No 6 June 2005.

I include the outline of a couple of interesting presentations.

## **Effect of pharmacist iron repletion interventions on haemoglobin response in patients with chemotherapy-induced anaemia or anaemia of cancer**

Baribeault and Shah, Boston USA 02-002

Pharmacists identified patients with anaemia and in those that were iron deficient suggested physicians ordered iron supplements as well as treatment with darbepoetin. Parenteral iron was always recommended but seldom ordered. Primary end-point was Hb between 11-12 g/dL.

	Week 4	Week 16
Iron supplemented	35%	71%
No iron supplements	30%	50%

Conclusion: Patients with anaemia treated with darbepoetin do better if given iron repletion.

## **Development of a prediction index for patients at high risk of severe chemotherapy induced nausea and vomiting**

Petrella, Dranitsaris, Trudeau, Rezmovitz et al, Toronto Canada 04-035

### **Background**

- 20-40% cancer patients fail to achieve complete control of emesis
- Several risk factors have been identified eg female, tumour type
- However, no overall risk assessment is available

### **Method**

- Conduct a prospective cohort study to identify risk factors in 200 patients receiving chemotherapy via a questionnaire pre starting treatment and after each cycle of chemotherapy

### **Results**

- 864 cycles chemotherapy, median per patient = 3 cycles, mean age = 58, 62% female. Acute N+V = 7.2%, Delayed N+V = 9.3%
- 5 Risk factors were identified for acute N+V: age, comorbidity, chemotherapy type, alcohol intake and antiemetics
- 8 Risk factors were identified for delayed N+V: age, comorbidity, chemotherapy type, alcohol intake, cycle number, acute vomiting, antiemetics.

MASCC / 2006 / Toronto



## **Side effects associated with the use of dexamethasone for prophylaxis of delayed emesis after emetogenic chemotherapy**

Vardy, Galica, Chiew, Tannock. Toronto Canada 04-041

### **Background**

- Role of dexamethasone in reducing delayed emesis in highly emetogenic chemotherapy is proven but there is less evidence of benefit after mild-moderate emetogenic regimens

### **Aim**

- To assess the side effects of dexamethasone after mild-moderate emetogenic regimens via use of a Dexamethasone Symptom Questionnaire

### **Results**

- Insomnia (45%); indigestion/epigastric discomfort (27%); agitation (25%); increased appetite (18%); weight gain (17%); acne (15%)

### **Conclusion**

- In mild-moderate emetogenic regimens side effects of dexamethasone may outweigh benefits.

## **Linking of antiemetic protocols to chemotherapy regimens in a computerised physician order entry system for chemotherapy**

De Angelis, Charbonneau, Giotis, Elia-Pacitti, Toronto Canada 02-021

### **Background**

- Computerised order entry has been in use since 1996
- Physicians select therapy from previously agreed upon disease site specific chemotherapy regimen lists
- Physicians can choose any antiemetic protocol and there is a great variability in use and these are not necessarily consistent with international guidelines

### **Methods**

- All chemotherapy regimens were linked to an appropriate pre and post antiemetic protocol according to international guidelines. These orders are automatically generated when the chemotherapy is chosen. These can be modified if patient results are suboptimal

### **Conclusions**

- More uniformity for antiemetic prescribing
- Consistency with accepted antiemetic guidelines

# BMT Pharmacists Meeting 2006 Hawaii USA

*Diana Booth, ISOPP member*

At the 2005 ISOPP Australasian Regional symposium in Adelaide, Australia, Jude Lees reported on her experience at the 2005 BMT Tandem Meetings in Keystone USA. It's fair to say that BMT pharmacists practice in a fair degree of professional isolation.

Jude enthusiastically invited us to consider going to the 2006 BMT Tandem Meetings in Hawaii as the pharmacy meeting is the only conference aimed specifically at BMT pharmacists. She certainly didn't have to twist my arm too hard because I decided to take her advice and went. It was a fantastic experience, and I would also like to encourage those involved in transplanting to consider going.

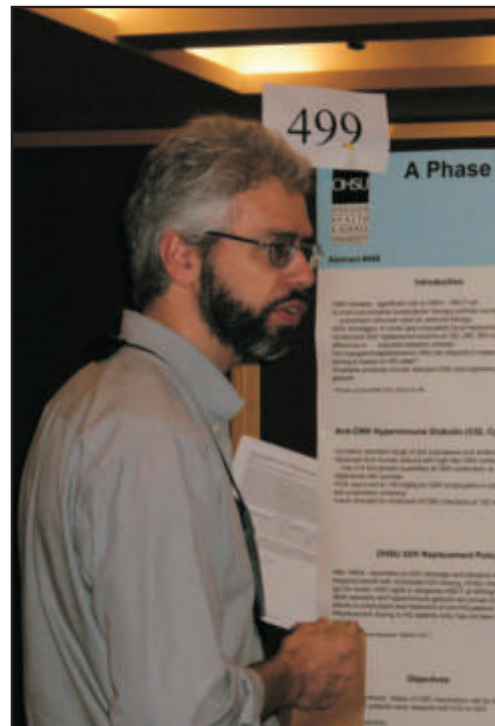
The Tandem Meetings are jointly run by ASBMT (American Society for Blood and Marrow Transplantation) and CIBMTR (Centre for International Blood and Marrow Transplant Research). In addition to the clinicians meeting, parallel sessions are held for BMT pharmacists, clinical research professionals, BMT data managers and BMT centre administrators. There were 200 pharmacists at the 6th annual BMT Pharmacy Conference and registration to the pharmacists meeting allows you to attend the clinicians meeting as well, so you get two conferences for the price

of one. In fact it works both ways, because a few clinicians were spotted sneaking into some of the pharmacy sessions as well.

I found every session interesting and informative but the following were particular highlights for me.

Dr. Kenneth Cooke of University of Michigan Cancer Centre (UMCC) spoke on Idiopathic Pneumonia Syndrome (IPS). In addition to an excellent overview of the nature and aetiology of lung pathology post transplant he presented the UMCC data on the use of etanercept. The use of 0.4mg/kg by SC injection twice weekly for 8 doses (with 2mg/kg/day of corticosteroids for 7 days, then taper) was associated with 73% 28 day survival, versus 33% for historical controls. He noted that when response occurred it was rapid with a median of 2 doses until oxygen was discontinued. This is important because duration of ventilation less than 48hours is associated with 90% 28 day survival, versus 20%.

Consequently he recommends giving the first etanercept dose IV (off licence) for quicker response. Rasburicase leads to dramatic responses in uric acid levels but can induce much budgetary angst.



Joe Bubalo, ISOPP member and BMT Pharmacist from Oregon, USA won the best of the Pharmacists Oral Paper Session.

Steven Trifilio of Northwestern Memorial hospital presented one of the best pharmacist papers. He showed that a single dose of 3 mg with subsequent doses of 1.5 mg Q6-8H prn effectively lowers serum uric acid levels into the normal range within

24-48 hours while maintaining or improving renal function. In fact the single 3 mg dose was sufficient in 42 of 50 patients. Dr. George MacDonald, a hepatologist from Fred Hutchinson Cancer Research Centre, gave a fascinating talk on the impact of liver disease and HSCT. Some take home messages included:

- Patients with a Child's A score may survive transplant with non-myceloablative or "liver friendly" regime. Few with a Child's B score and none with a Child's C score will survive.
- In addition to the normal clues to liver disease additional warning flags include jaundice with previous chemo, mylotarg exposure, history of

myelofibrosis, prior liver irradiation, previous transplant, fungal infection

- Lamivudine prophylaxis for Hepatitis B



Helen Leather, left, (ISOPP Education Committee Chair) in her spare time Chairs the BMT Pharmacists Meeting satellite to the Tandem BMT meeting. Sitting with fellow ISOPP members from left, Jude Lees, Diana Booth, Ashley Morris Engemann, Jill Davis, Moe Schwarz with husband Wayne.

## BMT Pharmacists Meeting 2006 Hawaii USA

*continued*

reactivation should be continued for a full 6 months post full immune reconstitution.

- A relatively small increase in serum bilirubin during transplant indicates a large increase in mortality risk and it is important to act on potential causes such as medications, GVHD and infection at the first indication of the problem rather than waiting until it is probably too late. See Gooley et al Hepatology 2005; 41:345-52

Dr. Borje Anderson of MD Anderson presented work on once daily, targeted IV busulphan in combination with fludarabine for AML. Relapse free survival at one year with targeted BuFlu was over 90% compared to 45% for fixed dose BuFlu or BuCy. Unfortunately, the overall survival was not improved due to higher treatment related mortality but more work is being done to clarify the target AUC for busulphan in the hopes of improving this.

Thanks to Royal Melbourne Hospital for support to go to this meeting and to Helen Leather for organizing such a marvelous educational experience.

For information on 2007 BMT tandem meetings, see [www.cibmtr.org](http://www.cibmtr.org) or [www.asbmt.org](http://www.asbmt.org) ■

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Winners of the ISOPP X Travel Grants will be announced in the June Newsletter.

## Have you visited the ISOPP website recently?

The website contains items of interest for all ISOPP members. The News page is regularly updated with news about ISOPP including awards, election results, ISOPP symposia and other meetings. An added benefit is drug information updates from the Education Committee Chair, Helen Leather and others. In the Members Area there is a Members Discussion section where you can ask a question and others can answer - or you might be able to answer one of your fellow ISOPP members. This can reduce the isolation of working in countries with small oncology pharmacist numbers and attract opinions from experienced colleagues. Why not try it today?

## New members for 2006

### Australia:

Debbie Bajrovic  
Diana Booth  
Kate Burt  
Genevieve Daly  
Stephen Kinsey-Trotman  
Li-ling Ng  
Tracy Shields  
Kerry White  
Kait Wong

### Canada:

Jean-Francois Bussieres

### China:

Keith Kwok Kei So  
Jiang-Quan Zhou

### Germany:

Gisela Barniske  
Joachim Berger  
Kerstin Bornemann  
Claudia Evers  
Elke Gensel  
Ulrike Goebel  
Ruth Hangen  
Cornelia Heese  
Eric Heideman  
Elke Hellmeister  
Gerald Hensel  
Gundela Inter  
Andrea Kleber  
Juergen Knoefel  
Claudia Maaßen  
Gregor Müller  
Irene Pigulla  
Tilman Schoening  
Doris Schwaabe  
Diana Szameit  
Olaf Zube

### India:

Viljay Roy

### Iran:

Sayyed A. Sajadi Tabassi

### Japan:

Makiko Yoshida

### Lebanon:

Shereen Nabhani  
Salam Abdulwahed Osta

### Malaysia:

Sujatha Suthandiram

### Saudi Arabia:

Lamya Alnaim

### Spain:

Garbine Lizeaga

### Sweden:

Agneta Brismar

### Thailand:

Eupar Chanyongvorakul  
Busba Chindavijak  
Phakdee Chiratthitichot  
Kanit Danpitakkul  
Nuchalinda Eiumbutlop  
Chaninun Ketkaew  
Chidchonnee Kosolpatanadurong  
Linda Luangarpa  
Napeeti Maneewongpongphan  
Noppawan Permsombut  
Tawan Petchrat  
Theera Srisara  
Ladda Srisuttikamol  
Krittika Tanyasaensook  
Benjamaporn Tonboon  
Jittima Ungsupanit  
Jumpon Utta  
Wannaporn Wattanawong

### USA:

Abigail Sommer

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