PHARMA COEPIDEMIOLOGY

Non-cancer drug consumption during the early trajectory of lymphoma survivorship

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Summary
Purpose. — This study explored the use of non-cancer drugs in lymphoma survivors during the early trajectory (0 to 2 years) of cancer survivorship and determined the factors that influenced this consumption.
Methods. — Between January and March 2014, a cross-sectional survey was conducted to assess drug consumption in adult lymphoma survivors at the Toulouse University Hospital. This study was based on a questionnaire consisting of ten open questions related to medical prescription and/or self-medication occurring within the last 3 months.
Results. — A total of 83/103 lymphoma survivors returned the questionnaire. This study showed that 91.6% of patients were drug consumers (about twice more than the general French population). Twenty percent of patients were treated with ≥ 5 drugs. Overall drug consumption mainly concerned analgesics, anti-inflammatory drugs and psychotropics. The presence of comorbidity,
urban residence and female gender were associated with overall drug consumption. Moreover, half of survivors required at least one self-medication. Finally, only seven survivors (8.4%) reported no use of any medication. Conclusion This study shows that, at least during the early trajectory of cancer survivorship, lymphoma patients are heavily treated with non-cancer drug therapy. This drug consumption profile may have serious implications in terms of safety, overall benefit and health economics.

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Abbreviations

aaIPI age adjusted international prognostic index
ABVD doxorubicine, bleomycine, vinblastine, dacarbazine
ACVBP doxorubicin, cyclophosphamides, vindesine, bleomycin, prednisone
AMA-AC ambulatory medical assistance after cancer procedure
ATC anatomical therapeutic chemical
BEACOPP bleomycin, etoposide, doxorubicin, cyclophosphamide, vincristine, procarbazine, prednisone
CHOP cyclophosphamide, doxorubicin, vincristine, prednisone
CHVP cyclophosphamide, doxorubicin, etoposide, prednisone
DLBCL diffuse large B-cell lymphoma
FL follicular lymphoma
FLIPI follicular lymphoma prognostic index
HADS hospital anxiety and depression scale
HIV human immunodeficiency virus
HL Hodgkin lymphoma
IPS Hasenclever international prognostic score
NHANES national health and nutrition examination survey
OR/ORa odds ratio/adjusted odds ratio
PTSD post-traumatic stress disorder
R rituximab
SD standard deviation

Methods

Study design
Between January and March 2014, a cross-sectional survey was conducted to assess drug consumption in adult lymphoma survivors. All patients were in complete response following chemotherapy and were being monitored in the ambulatory medical assistance after cancer (AMA-AC) programme at the Toulouse university hospital. After their first line treatment, lymphoma patients in complete remission can join the AMA-AC programme based on the collaboration of a nurse coordinator and a general practitioner on the recommendation of their oncologist. This programme permits the surveillance of lymphomas survivors during the two first years after treatment [3].

Patient population
Lymphoma survivors were defined as those with complete response according to the Cheson criteria [4]. They all received their last anticancer treatment cycle between 6 and 24 months before the survey. Patients under 18 years of age at diagnosis, or who were physically and/or mentally unable to participate in the programme were not included.

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