

UTVRĐIVANJE NEADHERENTNOSTI KOD PACIJENATA KOJI PRIMAJU ELTROMBOPAG

**Marija Pendovska^{1,4*}, Irina Panovska Stavridis¹, Svetlana Krstevska Balkanov¹,
Marija Popova Labacevska¹, Zlate Stojanoski¹, Marija Nadziska²,
Mihail Aleksandrov^{3,4}, Biljana Lazarova⁴, Viktorija Maksimova⁴**

¹ JZU Univerzitetska hematološka klinika, Univerzitet "Sv. Ćirila i Metodija",
Bul. Majka Tereza 17, 1000 Skoplje, R. S. Makedonija

² JZU Institut za plućne bolesti kod dece KOZLE, 1000 Skoplje, R. S. Makedonija

³ Odeljenje za proizvodnju, istraživanje i razvoj, TemraHin Doo Kočani, Orizova 9, 2300
Kočani, R. S. Makedonija

⁴ Fakultet medicinskih nauka, Univerzitet "Goce Delčev" Štip, Krste Misirkov 10A, 2000
Štip, R. S. Makedonija

*marija.311156@student.udg.edu.mk, marija.hemato@gmail.com

Eltrombopag, oralno primjenjen agonist trombopoetinskog receptora, selektivno se vezuje za transmembranski domen trombopoetinskog receptora na površini trombocita, megakariocita i ćelija prekursora megakariocita (1). Cilj našeg istraživanja je utvrđivanje neadherentnosti pacijenata i njen uticaj na efikasnost i bezbednost propisane terapije, kao i mogućnosti neuspeha lečenja. Opservaciona, longitudinalna i retroprospektivna studija sprovedena je u JZU Univerzitetskoj klinici za hematologiju u Skoplju, R.S.Makedonija. Praćeno je 17 pacijenata (9 muškaraca i 8 žena) od januara do avgusta 2023 godine. Pet od njih je bilo sa dijagnozom aplastične anemije i 12 sa imunom trombocitopenijom. Svi su lečeni Eltrombopagom. Sistematski smo pregledali medicinsku dokumentaciju iz Odeljenja bolničke apoteke, prikupili anamnestičke podatke i determinirali neadherentnost: kroz praćenje frekvencije doziranja, dvostruko uzimanje terapije, izostanka doze leka, lek-lek interakcija, i interakcija između hrane/suplementa i leka. Identifikovano je 13 slučaja neadherentnosti, od kojih se 3 (23,08 %) odnosi na frekfencije doziranja, 1 (7,69 %) na dvostruko uzimanje terapije, 5 (38,46 %) na mogućnost lek-lek interakcije, 2 (15,38 %) na mogućnost interakcije hrana/suplement- lekova i 2 (15,38 %) su bile povezane sa izostavljenim dozama. Neadherentnost je ozbiljan problem koji ne pogađa samo pacijenta već i zdravstveni sistem. Intervencija kliničkog farmaceuta može poboljšati adherencu pacijenata i sprečiti greške u pridržavanju, jer je najvažnije utvrditi efikasnost i bezbednost pridržavanja propisane terapije, višekratna interakcija leka i hrane/suplementa koje mogu da variraju u zavisnosti od odnosa doz-odgovora i rizika od nedovoljne efikasnosti terapije (2).

Literatura

1. Garnock-Jones, K.P. and Keam, S.J. Eltrombopag. Drugs; 2009; 69(5):567-76. doi: 10.2165/00003495-200969050-00005.
2. Spinevine, A., et al. The Role of Pharmacists in Optimising Drug Therapy; 2023; pp 105–117.

DETERMINATON OF NON-ADHERENCE IN PATIENTS RECEIVING ELTROMBOPAG

Marija Pendovska^{1,4*}, Irina Panovska Stavridis¹, Svetlana Krstevska Balkanov¹,
Marija Popova Labacevska¹, Zlate Stojanoski¹, Marija Nadziska²,
Mihail Aleksandrov^{3,4}, Biljana Lazarova⁴, Viktorija Maksimova⁴

¹ PHO University Clinic of Hematology, Ss. Cyril and Methodius University, Blvd. Majka Tereza 17, 1000 Skopje, Republic of North Macedonia

² PHO Institute for Lung Diseases in Children KOZLE, 1000 Skopje, Republic of North Macedonia

³ Department of production, research & development, "TetraHip LLC Kocani", Orizova 9, 2300 Kocani, Republic of North Macedonia

⁴ Faculty of Medical Sciences, Goce Delcev University, Krste Misirkov 10-A, 2000 Stip, Republic of North Macedonia

*marija.311156@student.udg.edu.mk, marija.hemato@gmail.com

Eltrombopag, an orally administered thrombopoietin receptor agonist, selectively binds to the transmembrane domain of the thrombopoietin receptor on the surface of platelets, megakaryocytes and megakaryocyte precursor cells (1). The aim of our research is to determine patient non-adherence and its impact on the effectiveness and safety of prescribed therapy, as well as the possibility of treatment failure. The observational, longitudinal, and retrospective study was conducted in the PHO University Clinic of Hematology in Skopje, R.N.Macedonia. 17 patients (9 men and 8 women) were followed from January to August 2023. Five of them were with diagnose aplastic anemia and 12 with immune thrombocytopenia. All of them treated with Eltrombopag. We have systematically reviewed medical records from the Department of Hospital pharmacy, collected anamnestic data and determine non-adherence to therapy, followed by dose frequency, double taking therapy, omitted doses, drug-drug interactions and food/supplement-drug interactions. Thirteen types of non-adherence were identified, of which 3 (23,08%) were related to dose frequency, 1(7,69 %) was related to double taking therapy, 5 (38,46%) were related to the possibility of drug-drug interactions, 2 (15,38%) with possibility for food/supplement-drug interactions and 2 (15,38 %) were related with omitted doses. Failure to adherence is a serious problem which not only affects the patient but also the health care system. The clinical pharmacist intervention can improve patient adherence, because the most important determinants effectiveness and safety are adherence to the prescribed therapy, multiple drug and food/supplement interactions which can vary on dose-response relationship, and risk of insufficient effectiveness of therapy (2).

References

1. Garnock-Jones, K.P. and Keam, S.J. Eltrombopag. Drugs; 2009; 69(5):567-76. doi: 10.2165/00003495-200969050-00005.
2. Spinewine, A., et al. The Role of Pharmacists in Optimising Drug Therapy; 2023; pp 105–117.