EVALUATION OF A PHARMACY DELIVERED ONCOFERTILITY INTERVENTION

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Background

Cancer treatments vary in their likelihood of affecting the future reproductive abilities of patients. Approximately 40% to 80% of cancer patients that are female assigned at birth face possible infertility as a result of their cancer treatments, such as chemotherapy, radiation, and surgery. An additional 15% to 30% of cancer survivors that are male assigned at birth also face infertility as a result of chemotherapy. Therefore, it is imperative as healthcare providers that patients are made aware of fertility preservation, also coined oncofertility, techniques available at the time of their cancer diagnosis.

While not all medications used in cancer treatment are considered gonadotoxic, some treatments do have the potential to cause long-term infertility through damage to the testes or ovaries. There are different options to preserve fertility. One option is to bank healthy cells prior to starting cancer therapy. Postpubescent patients can opt for embryo or gamete (sperm or egg) cryopreservation. Prepubescent patients may use tissue cryopreservation of either testicular or ovarian tissue.

Both the American Society of Clinical Oncology (ASCO) and the National Comprehensive Cancer Network (NCCN) recommend that patients diagnosed with cancer be offered fertility preservation services before beginning treatment.

The Walgreens Specialty Pharmacy Connected Care Oncology Fertility Preservation intervention was designed to ensure that patients had the option of consulting with a reproductive endocrinologist prior to starting their gonadotoxic treatment.

Objective

This study aimed to understand the impact of the Connected Care Oncology Fertility Preservation intervention, including its value in creating awareness around fertility preservation in newly diagnosed cancer patients.

Materials and Methods

This study design was descriptive, nonexperimental, and retrospective. Records from patients who received oncology treatment from Walgreens Specialty Pharmacy from December 2023 to October 2024 were analyzed to determine the percentage of patients who opted for a fertility preservation counseling session.

Results

A total number of 807 patients were classified as new to therapy cancer patients during this period and were asked about a fertility preservation conversation. 556 patients, or 69%, felt a conversation was not necessary. 146 patients, or 18%, stated their oncologist had not discussed it with them, and 105 patients, or 13%, stated they did have a consultation with a fertility specialist.

Conclusions

This study supports already published data that opportunities still exist to counsel newly diagnosed oncology patients on their fertility preservation options. Additionally, the intervention shows that pharmacists are another resource patients could look to as a solution to a general lack of awareness among oncology clinicians and patients. Moreover, pharmacy team members can educate patients on financial assistance resources, which has also been reported as a major barrier to fertility preservation³.

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