

20<sup>th</sup> World Congress on

# RADIOLOGY AND ONCOLOGY

September 26-27, 2018 | Chicago, USA

## Examining time to receipt and causes of delay in novel oral oncolytics

Shikha Jain, Ann A Wang, Christopher Tapia, Yasin Bhanji, Christopher Campbell, Daniel Larsen, Derick Gross, Seema Ganatra, Melad Qodsi and Claudia Tellez

Northwestern Memorial Hospital, USA

**Introduction:** Novel oral oncolytic agents have become the standard of care and first-line therapies for many malignancies. However, issues impacting access to these drugs are not well explored. We aim to identify potential barriers that delay treatment for patients who are prescribed novel oral oncolytic.

**Methods:** This was a retrospective review of adults who were newly prescribed a novel oral oncolytic for FDA-approved indications at a single tertiary care center. Patients were identified via electronic prescription data. Demographics, insurance information, and prescription dates were extracted from the electronic medical record and pharmacy claims data. Statistical analyses were performed to determine whether time-to-receipt (TTR) was associated with pharmacy transfers, manufacturer assistance, the drug prescribed, and insurance category.

**Results:** Of the 272 successfully filled prescriptions, the mean TTR was  $7.3 \pm 10.3$  days (range 0-109 days). Patients with Medicare experienced longer TTR ( $9.1 \pm 13.1$  days) compared to patients with commercial insurance ( $4.4 \pm 3.3$ ). Uninsured patients experienced the longest TTR ( $15.7 \pm 7.8$  days) overall. Pharmacy transfers and manufacturer assistance programs were also significantly associated with longer TTR. Ten prescriptions remained unfilled 90 days after the study period and were considered abandoned.

**Conclusion:** Insurance has a significant effect on the time to receipt of newly prescribed novel oral oncolytic. Pharmacy transfers and manufacturer assistance are also associated with longer wait times for patients. Our retrospective analysis identifies areas of improvement for future interventions to reduce wait times for patients receiving novel oral oncolytic.

## Biography

Shikha Jain is a board-certified hematology and oncology physician on faculty at Northwestern Memorial Hospital. She completed her medical school at Michigan State and her residency at UIC. Prior to starting fellowship, she worked as a locum tenens physician in New Zealand as an inpatient consultant. She completed her hematology and oncology fellowship at Loyola Hospital. She writes for Doximity, KevinMD and ASCO Connection. She has given talks at other institutions and in the community on Immunotherapy in Oncology and the impact of social media on medicine. She founded and co-chaired the first CME Women In Medicine Symposium at Northwestern. Topics include; how to best find leadership roles, physician wellness, gender bias in medicine, and advancing your career. There are also panels on mentorship and diversity. Her research interests include the impact of social media on medicine from both the physician and patient perspective; QI studies looking at oral oncolytic and avoidable delays in initiation of treatment; advances in GI oncology. She has published more than 15 publications and abstracts in reputed peer-reviewed journals.

shikha.jain@nm.org

## Notes: