

CAPhO Conference 2024 Round Table Discussion

Survivorship and the Role of Pharmacy Professionals in Pediatric and Adult Settings

Listed below are useful resources which can be used when providing long-term follow-up care to patients who have completed therapy for cancer. On the second page of this document, there is a case that we will review in the round table discussion, if time permits (no preparation work is necessary). The case is based on an AYA patient to cover issues from both the adult and pediatric population. Although the case reviews a patient who has received a stem cell transplant, the complications discussed can also arise in other oncology settings as radiation and the types of chemotherapy used are seen across various tumour groups.

Models of Survivorship Care:

Jefford M, Howell D, Li Q, Lisy K, et al. Improved models of care for cancer survivors. *Lancet*. 2022. Apr 16;399(10334):1551-1560. [Access online.](#)

Cancer Care Ontario Guidelines: Follow-Up Model of Care for Cancer Survivors. [Access online.](#)

Follow-up Guidelines and Calculators:

Children's Oncology Group – Long-Term Follow-Up Guidelines for Survivors of Childhood, Adolescent and Young Adult Cancers. Version 6.0 – October 2023. [Access online.](#)

St. Jude's Childhood Cancer Survivor Study – Cardiovascular Risk Calculator. [Access online.](#)

Rotz S, Bhatt N, Hamilton B, et al. International Recommendations for Screening and Preventative Practices for Long-Term Survivors of Transplantation and Cellular Therapy: A 2023 Update. *Bone Marrow Transplant*. 2024 Feb 27. [Access online.](#)

Other Useful Clinical Practice Guidelines:

Morin S, Feldman S, Funnell L, Giangregorio L, et al. Clinical practice guideline for management of osteoporosis and fracture prevention in Canada: 2023 update. *CMAJ*. 2023 Oct 10;195(39):E1333-E1348. [Access online.](#)

Pearson G, Thanassoulis G, Anderson T, Barry A, et al. 2021 Canadian Cardiovascular Society Guidelines for the Management of Dyslipidemia for the Prevention of Cardiovascular Disease in Adults. *Can J Cardiol*. 2021 Aug;37(8):1129-1150. [Access online.](#)

National Advisory Committee on Immunization. (2024). *Immunization of immunocompromised persons: Canadian Immunization Guide*. Government of Canada, Public Health Agency of Canada. [Access online.](#)

Survivorship Case:

MG is a 26 year old woman who is 2 years post allogeneic stem cell transplant from a matched unrelated donor for Ph- ALL. She presents to your long-term follow-up clinic for her initial appointment. The following is a summary of her work-up:

Medication Information		Medical History	
Allergies: NKDA		Transplant related complications: <ul style="list-style-type: none">Stage 3, Grade III aGVHD of GI tractCMV reactivation, treated with valganciclovirTreated with cyclosporine, ruxolitinib and steroids x 6 months	
Chemotherapy History: <ul style="list-style-type: none">Modified DFCl protocol (induction, CNS therapy, intensification x 1)Conditioning: FLUBUP / ATG + TBI		Other medical history: <ul style="list-style-type: none">Appendectomy at age 17Hypothyroidism x 2 yearsDepression x 5 years	
Cumulative anthracycline dose: Doxorubicin 120 mg/m²			
Current Medications: <ul style="list-style-type: none">Escitalopram 20 mg po dailyLevothyroxine 75 mcg po dailyValacyclovir 500 mg po daily			
Social History		Family History	
<ul style="list-style-type: none">Living at home with boyfriendFinishing courses to become a teacherOccasional smoking (2-3 cigarettes per week)Social alcohol with 1-2 drinks on weekendsLimited exerciseDiet – has a busy life so eats out frequently		<ul style="list-style-type: none">One younger sister, alive and wellOne older brother, diagnosed with T2DMMother with T2DMFather passed away from MI at age 53	
Vaccines (post-transplant) and Infectious Disease		Screening and Other Investigations	
<ul style="list-style-type: none">PCV13 x 3 doses + PPS23 x 2 dosesDTaP-IPV-Hib x 3 dosesHep B x 3 dosesReceived annual influenza vaccine this yearReceived updated COVID-19 vaccine Fall 2023No live vaccines post transplantAnti-infectives in last year: ciprofloxacin x 2 courses, fosfomycin 3g x 2 doses		<ul style="list-style-type: none">Breast cancer: no screening historyCervical cancer: last Pap 3 years ago (normal)Colorectal cancer: no screening historyPFT's: Completed within past year – normalBMD: none completed post-transplant	
Relevant Labs & Vitals			
<ul style="list-style-type: none">Hgb 132 (120 – 160)Plts 250 (150 – 450)Neut 4.4. (1.8 – 7.7)TSH 2.29 (0.20 – 6.50)ALT 45 (< 50)ALP 110 (40 – 120)	<ul style="list-style-type: none">Total cholesterol 5.80Triglycerides 1.93 (< 1.70)LDL 4.1 (< 3.40)HDL 0.80Non-HDL 5.10 (< 4.20)Scr 72 (40 – 100)CrCl 127 mL/min	<ul style="list-style-type: none">BG (random) 7.0 (3.3 – 11.0)A1C 6.0 (4.8 – 5.9)Height 165 cmWeight 77 kgBMI 28.3BP 126/78HR 78	
Issues Identified During Assessment			
<ul style="list-style-type: none">Complaints of recurrent UTI/yeast infection symptoms (dysuria, pruritis)Experiencing pain on intercourseIncrease in anxiety symptoms in past 3 months (insomnia, inability to concentrate)Asking for a referral to fertility clinic (no menses since transplant)			