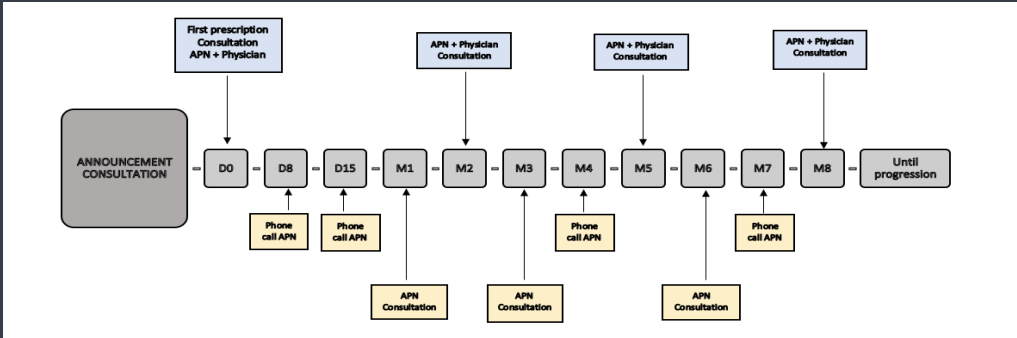


Advanced practice nurse management in Multiple Myeloma treated with Lenalidomide Dexamethasone: a new challenge?

M. SAPET, C. MIGALA, E. DAGUENET, P. COLLET, K. BOUSSOUALIM, T. THOMAS, D. GUYOTAT, K. AUGÉUL-MEUNIER – no conflict of interest

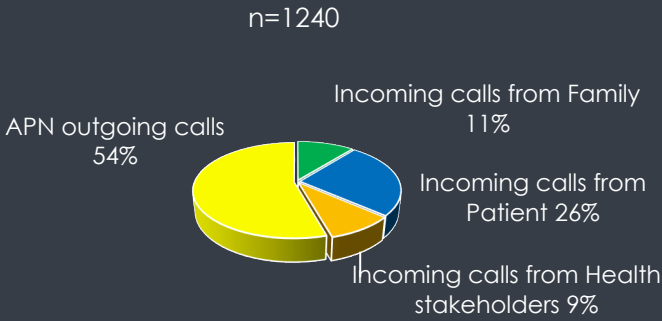
Background: Therapeutic approaches in Multiple Myeloma (MM) have considerably changed over the last few years, with an increase in effective oral chemotherapy and continuous treatment. An innovative follow-up protocol by advanced practice nurse (APN) has been implemented at the Institut de Cancérologie de la Loire Lucien Neuwirth (ICLN). This study aims to describe precisely the original management of MM patients treated with Lenalidomide Dexamethasone (LD) and to evaluate the impact of APN on the patients' ambulatory care.

Methods: Follow-up by an oncology APN was suggested for 42 MM patients who had recently been treated with LD in the medical haematology department from April 2017 to September 2020. There was a medical delegation of chemotherapy renewal and associated therapies, management of drug toxicities with dosage adjustment or discontinuation.

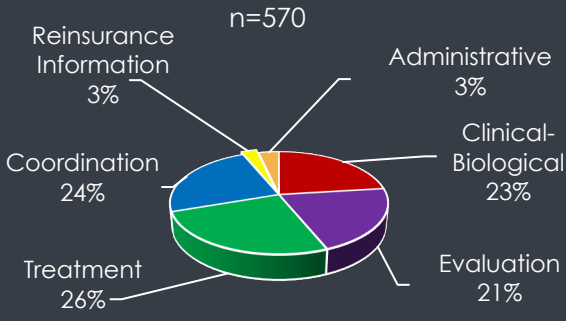


Results: 42 patients were included, 32 in first line, 6 in relapse (Xth line) and 4 in maintenance therapy. All APN interventions were recorded, representing 1240 phone calls and 162 consultations. All reasons for appeal were exhaustively analyzed. Eighty-two calls were referred with 45 consultations triggered. Most of the calls were frequent the few first months, with a high request for information and reassurance specially treatment-naïve or relapsed patients. Sixty per cent of all patients and 100% of relapsed patients have been hospitalized at least once. APN was on front line, with a direct line, enabling better coordination between the primary care team and the hospital. APN was able to manage multiple side effects, organizing hospitalizations and transfusions, saving full time in a physician job thanks to her knowledge and prescription skills.

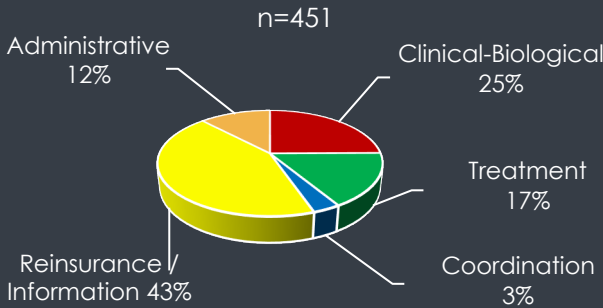
	Phone calls/patient	First line Ld (n=32)	Xth line Ld (n=6)	Maintenance L (n=4)
Before M3	Average of phone calls /patient/month (min-max)	4,34 (0,33-9,33)	4,83 (2-7,67)	1,33 (1-1,67)
After M3	Average of phone calls /patient/month (min-max)	1,21 (0-4)	1,45 (0,13-1,45)	0,76 (0,17-1,17)



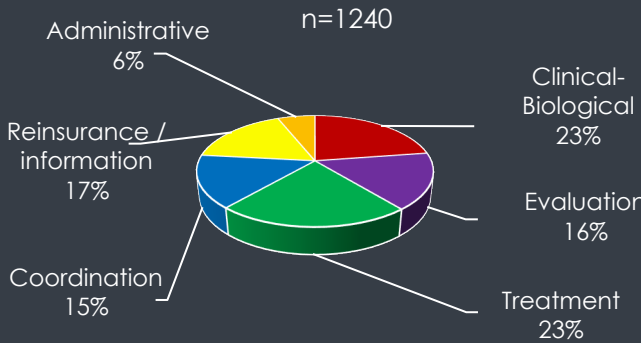
Phone calls origin (APN incoming and outgoing calls)



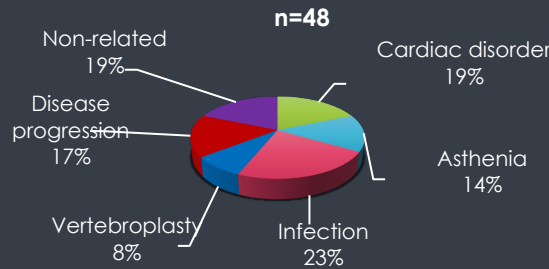
APN outgoing call motifs



APN incoming calls motifs from Patient/Family



Total call motifs



Hospital admissions

Conclusion: This original study highlights the tremendous role of APN managing LD treatment. The needs are different between anxious patients with a demand for psychological support and answers to questions, and polypathological patients who need clinical reassessment and therapeutic adaptation/ monitor and control physical symptoms. Due to aging population and increasing use of oral chemotherapy, APN should be one of the answers to current and future health issues.