

COLORECTAL CANCER:
MAYO'S vs. De GRAMONTS' REGIME

REGIME TOXICITY, COST-EFFECTIVENESS and RATIONALE



**DIPLOMA OF PHARMACY IN THE
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Abstract

When talking about making choices in our daily life, the things that come in our mind are impact or risk and definitely about cost. As a medical practitioner view however, it is more on the effectiveness and reliability aspect of a treatment. Thus we based upon our study on the three main keyword, which is impact, cost and effectiveness.

The aims of this study were to determine the least incidence of toxicity on patients, to assess the economic cost of any gain in quality of life achieved and exploring the correlation between cost-effectiveness and toxicity of Mayo's and De Gramonts' regime.

The study used a non-randomized with prospective and retrospective design for the field involving toxicity and cost-effectiveness respectively. The study was conducted entirely in the hospital wards and day-care wards for cytotoxic administration in General Hospital Malacca. Data were collected through the aid of questionnaire, patient medical record, CDR unit record of 2007-2008 and Medical Store database (e-Perolehan and ESPKB).

A total of 39 patients were interviewed. The prevalence of toxicity was as high as 76.9% with a higher number in females (88.9%) and males (71.2%). The most common side effects arises from both regimen (in count) is fatigue and closely followed by loss of appetite, other side effect are shown to be more mild while alopecia and burning sensation are identified to be other side effects that are quite major. Regarding the differences between each regimen number of sample, patients under Mayo's regime seemed to experience the highest degree of toxicity based on ANOVA test. In terms of cost, it is regarded that Mayo's regime prevails over De Gramonts' in providing the least expensive treatment (RM210.20 per person) though the ratio of effectiveness is much lower than De Gramonts'. Overall in cost-effectiveness view, De Gramonts' regime surpasses the Mayo's regime by a significant margin.

The causes of these events were hypothesized by us through three different aspects which are in terms of level of comprehension (awareness), management of toxicity (compliance) and impact of toxicity (psychological), as these aspect may contribute to the outcome or condition of the patients involved in the treatment.

In conclusion, although this study have not shown any significant association with the factors studied and had several limitation, the result obtained may provide a great insight to medical professional when dealing with management and choosing the right regimen for colorectal patients. Pharmacist and oncologist should be able to provide accurate and useful information to patients and provided them with the correct management on each of the possible risk and outcome of the treatment. This will hopefully increase patient's compliance to chemotherapy treatments and achieved better outcome, thus improving the level awareness in the oncology setting.

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