WORKING TOGETHER!

Treating APML in the community

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Authors: Juliet Hill, Richelle Finselbach, Melissa Wills, Mariko Hirohashi, Sarah Murray

01. Background

Acute Promyelocytic Leukaemia (APML) is a highly aggressive subtype of acute myeloid leukemia that accounts for 10% of adult AML cases. Typically, APML treatment requires intensive inpatient care. However, this study explores an alternative approach to delivering care by leveraging a community chemotherapy service, chemo@home, and tools for patients to be monitored even after treatment has ceased.

02. Aims

The aim of our study was to demonstrate the successful collaboration between a community chemotherapy service, chemo@home, and a public hospital day unit to treat a patient with APML during the consolidation phase of their treatment.

03. Method

A treatment protocol for the collaboration between a community chemotherapy service, chemo@home, and a Public hospital day unit, to treat a 38-year-old female patient with Acute Promyelocytic Leukaemia (APML) during the consolidation phase of her treatment, was developed,

04. Results

Effective communication between these two services played a critical role in ensuring the success of the community-based treatment. During the consolidation phase of APML treatment, the patient required close clinical monitoring, including daily blood tests to maintain potassium and magnesium levels, as well as twice-weekly electrocardiograms to monitor the QT interval. Electrolyte imbalance can lead to a prolonged QT interval. Additionally, logistical challenges, such as the storage and supply of arsenic trioxide with its short 72-hour expiry period and the storage of electrolytes in the patient's home, had to be navigated.

By implementing safe and effective team nursing practices, the collaboration between the hospital and community settings facilitated the completion of four consolidation cycles without any complications. The patient and her family expressed satisfaction with the care they received from both parties, as it allowed them to maintain a patient-centered approach while ensuring the safety and efficacy of the treatment. The patient greatly appreciated the opportunity to receive treatment in the comfort of her own home.

05. Collarborative Strategy

chemo@home is Australia's leading hospital substitution treatment provider, specialising in the domiciliary administration of chemotherapy and immunotherapy to patients being treated for cancer. Their established expertise and experience across Australia over the past ten years make them an ideal partner for this collaboration.

Their partner in this collaboration was the Calvary Mater Newcastle outpatient haematology day unit which serves as the public hematology unit in Newcastle, catering to the majority of patients being treated for haematological malignancies, in the Hunter New England Area Health Service.

06. Conclusion

This research highlights the successful collaboration between a community chemotherapy service and a hospital day unit in treating a patient with APML during the consolidation phase of her treatment in the community. This collaborative approach not only provided patient-centered care but also maintained the necessary safety measures and treatment efficacy.

Acknowledgements

We acknowledge the Specialists and staff of the Calvary Mater Newcastle outpatient haematology day unit, and the patient who trusted us to deliver their treatment.