

Pharmacy Utilization Meeting

March 31, 2023

Attendees

Linda Coyle (IMS)

Jennifer Stevens (IMS) – absent

David Angelaszek (IMS)

Emily Carver (IMS)

Kevin Ward (Georgia)

Randi Rycroft (Idaho)

Serban Negoita (NCI)

Peggy Adamo (NCI)

Marina Matatova (NCI)

Jennifer Hafterson (Seattle)

Tiffany Janes (Seattle)

Kaitlin Akif (NCI)

- David did a brief recap of the last meeting on February 3, 2023. The meeting was with Valentina and Lois and how we would generate and maintain a list of first course drugs for specific cancers. The goal is to have the lists readily available for reference without having to do an intensive manual review every time.
- The meeting discussed possibilities for how to do this but raised concerns about the difficulty of gathering the information to generate the cancer specific first course lists and the resources involved in maintaining them over time.
- It was not clear from the last meeting how to proceed or if we should proceed at all.
- Serban returned to Randi's point from the last meeting that first course treatment is a concept mainly used in cancer surveillance. It doesn't have a clear application in the clinical setting and is complicated by off-label use for drugs. Serban wanted to hear from the registry participants. Would having first course variables based on pharmacy data be useful to them and to researchers?
- Kevin: He thinks first course variables for pharmacy data is useful to the registries and is necessitated by the model of cancer surveillance used by the registries. He agrees with Randi that first course wouldn't be useful to researchers since it doesn't match clinical use. Data sets provided to researchers should not force this concept. Provide the raw data to researchers.
- He mentioned it is important to expand first course definitions beyond 1 year.
 - Pharmacy data indicate that patients don't start getting their medications from the pharmacy right away. Initial medications given at hospital or doctors office.
 - He would include medications given 6 months post 1 year after DX as first course treatment.
 - His specific interest and application for this is hormone for breast cases.
- Jennifer Hafterson agreed with Kevin. She commented that perhaps it is worth getting pharmacy data directly from medical facilities to capture initial treatments

- Peggy and Marina think it is worth the effort to generate a medication database with a first course indicator. We need to consider how difficult it will be to maintain.
- Marina: Consider a hybrid approach. Automated with occasional manual reviews and updates by a pharmacist.
- Serban: NCI will need to have internal discussions on how to assign resources for this project.
- Kevin: This undertaking will be complicated for chemotherapy and immunotherapy drugs. He recommended just starting with hormone to simplify things. First course has a clearer definition when it comes to hormone.
- Kevin: Also consider restricting to specific cancers. Progress on the project can be made much faster with this approach.
- Randi: Agreed that starting with hormone would simplify things for an initial approach. Hormone is less prone to off-label use. She agreed other modalities would be more complicated to address.
- Peggy is also agreed with this approach.
- Marina: how often is SEER*Rx updated? The new system should keep in mind SEER*Rx's update schedule.
- Serban: There is no standard timing for SEER*Rx updates.
- Peggy: SEER*Rx is updated when Lois is aware of updates. No structured information release. Example: She gets notified by FDA about updates.
- Serban: should be possible to have Lois update new tool or database when SEER*Rx gets updated.
- Marina: NCI should look at information available in current tools, NCCN, FDA APIs. Collate information from various sources periodically?
- **Action:** NCI team will meet internally to discuss the initial steps for this project.
- **Action:** David should email Nadia and Kathy to see if they can attend an upcoming meeting. It's unclear if the normal meeting time is an issue or if it was just scheduling difficulties. David should include Serban on email.
- Marina: Discussion with Nadia and Kathy should include use cases for researchers.
- Serban asked Kevin if he could give a presentation similar to what he gave at the December 2022 CCAB to Nadia and Kathy to get them up to speed on the group's efforts. Kevin agreed.