Denosumab Self-administration

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Background

2013: NICE approved agent with poor uptake

2015: Increased uptake across London Cancer in secondary care

2016: Presented to NCL JFC financial saving of 1.5 million in delivery costs.
Patients receiving treatment at UCLH

- Commonly wait over one hour in supportive care
- Commonly travel on a different day for administration
- Unnecessary observations
- Some requested self administration
<table>
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<tr>
<th>Asked by their clinician</th>
<th>Teaching visit – up to 3 administrations</th>
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<tbody>
<tr>
<td></td>
<td>Blood testing arranged</td>
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<tr>
<td></td>
<td>Self administration</td>
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Started October 2016

• Total 8 out of potential 13 patients chose to self administer
  - 6 still on self administration.

• 6 patients believed this method to reduce trips to the hospital
  - 3 patients have less frequent clinic visits

• 7 patients believed their quality of life to be improved

• No denosumab wastage after 9 months
I feel this is much less stressful for me

This saves me 12 days of work leave a year!

I would much prefer a nurse or doctor to do this as I don’t really trust myself

I’m used to doing other injections anyway!
Other Learning

• Oxford moved all patients to self-administration but many patients felt uncomfortable injecting themselves and went to their GP for administration.

• Denosumab self administration in giant cell at UCLH has enabled outreach clinic development.
How to Progress

Self-administration when prescribed at UCLH results in a loss of income due to the drug cost.

For every 100 patients that self administer the CCGs will save between £150,000 - 200,000 in delivery

Need to develop systems to allow more patients to self-administer for patients not on other active treatment.