

# Patients' needs and wishes regarding pharmaceutical care provided by the pharmacist for women treated with adjuvant endocrine therapy for breast cancer.

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**Background** Adjuvant endocrine therapy (AET) for hormone receptor-positive (HRP) breast cancer reduces the risk of recurrence. However, non-adherence and early discontinuation rates of women who have been prescribed AET are high. Medication counselling and adherence support may improve adherence.

**Purpose** To obtain insight into the needs and wishes of women using AET with respect to medication counselling and the role of the pharmacy team and to explore their views on the role of eHealth in AET.

**Method** A qualitative explorative study was conducted comprising semi-structured interviews (n=16) and a focus group (n = 5) among women with HRP breast cancer who use or have used AET after initial treatment. A thematic analysis approach was used.

**Findings** Participants had a strong need for comprehensive information on (the risk of) side effects, what to do in case of side effects, drug-drug (including drug-self-care medicines) interactions, on a continuous basis. In addition, the timing of the provision of information can be better tuned to the mental state of the patients. Participants reported to have been searching for missing information on the internet, leaflets and books. However they had difficulties with finding adequate information and doubted about the reliability of some resources. Participants indicated that pharmacies could play a larger role by providing information in a tailored manner, i.e. asking patients after their questions, problems and concerns on a continuous basis. Conversations should take place in a room with privacy. Finally, participants thought eHealth could contribute to information provision. Most participants had a slight preference towards the development of an application.

**Conclusion** Participants expressed a wish for comprehensive information on AET, in particular about side effects, drug-drug interactions and the use of concomitant self-care medicines. Information about AET was often not provided in a proactive manner nor was counselling on medicines well timed. Pharmacists could play a larger role in the provision of information and eHealth could be a suitable tool for the provision of reliable information about medicines. An educational pharmacist-led intervention program including eHealth and tailored to patients' needs and wishes should be developed and implemented.