OCEANIC PALLIATIVE CARE CONFERENCE 2021

THE NEGLECTED CANCER: ENZYME REPLACEMENT IN ADVANCED PANCREATIC CANCER

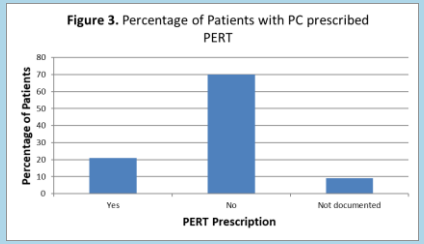
Amanda Landers [*], Helen Brown[#], Clare McKenzie [#], Matthew Strother [*] and Suzanne G Pitama [*]

[*] University of Otago, Christchurch NZ [#] Nurse Maude Hospice Palliative Care Service, Christchurch NZ

THE EVIDENCE

Pancreatic cancer (PC) continues to have a globally poor prognosis despite cutting-edge medicine. Malabsorption is a major feature in PC with studies showing rates up to 92%. In New Zealand we found only 21% of patients with advanced PC were commenced on PERT.[1]

Patients commenced on PERT showed clinically significant improvement in symptoms of diarrhoea, pancreatic and hepatic pain.[2]



The study showed PERT to be a safe therapy and international guidelines recommend PERT is used empirically. A 2020 study explored the experience of patient engagement with PERT and how the medication is taken and tolerated.[3] The patients needed extra information and knowledge about their changing relationship with food and digestion. This group of patients showed high health literacy and engagement.

A systematic review of the impact of PERT on patients with advanced PC highlighted the paucity of information available for this population.

QUALITY OF CARE

Optimal use of PERT

- Use 25,000IU Caps
- Commence base dose of 2 caps with meals and 1 cap with snacks
- Titrate to symptoms
- Take immediately before food

How best to engage

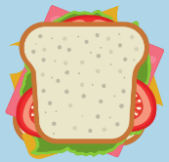
- Educate patients on their maximum dose
- This enables them to feel safe to manage own titration
- Explain digestion and role of PERT

PROMOTION OF PERT

PERT normalises and improves the eating experience, which in turn positively impacts quality of life .[3]

People with PC need

- To have good education about why PERT is used
- Be given control of their own meals



PERT was well tolerated almost universally. *"PERT has changed my life completely"*

It needs to be standard for all people with advanced pancreatic cancer to...

- See a dietician skilled in PERT
- Be offered PERT

PalliativeCare AUSTRALIA
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References:

1. Landers, A., Muircroft, W., & Brown, H. (2016). Pancreatic enzyme replacement therapy (PERT) for malabsorption in patients with metastatic pancreatic cancer. *BMJ supportive & palliative care*, *6*(1), 75–79. https://doi.org/10.1136/bmjspcare-2014-000694
2. Landers, A., Brown, H., & Strother, M. (2019). The effectiveness of pancreatic enzyme replacement therapy for malabsorption in advanced pancreatic cancer, a pilot study. *Palliative care*, *12*, 1178224218825270. https://doi.org/10.1177/1178224218825270
3. Landers, A., McKenzie, C., Pitama, S. G., & Brown, H. (2020). Enzyme replacement in advanced pancreatic cancer: patient perceptions. *BMJ supportive & palliative care*, bmjspcare-2019-002153. Advance online publication. https://doi.org/10.1136/bmjspcare-2019-002153

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