

SOCIODEMOGRAPHIC AND LIFESTYLE PROFILE OF PATIENTS WITH HEPATOCELLULAR CARCINOMA IN TREATMENT WITH SORAFENIB

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Introduction

The third cause of cancer-related death in the world, hepatocellular carcinoma (HCC) is a malignant liver tumor that occurs, in most cases, from the evolution of chronic liver disease or cirrhosis (CHAGAS et al, 2020; BRASIL, 2021). Oral chemotherapy is indicated for patients in the intermediate and advanced stages of the disease, with sorafenib being the second-line drug for treatment (CHAGAS et al, 2020). Oncological Pharmaceutical Care helps patients understand their treatment, promote greater adherence, identify possible drug-related problems (DRP), promoting a greater quality of life (SILVA et al, 2019). In this context, knowing the sociodemographic characteristics and lifestyle of patients with HCC is important to define better approaches during the Pharmaceutical Care and identify DRP, as studies with this focus have not yet been identified in Brazil (MAIA, GRELLO, CUNHA, 2021). The objective of this work is analyzing the sociodemographic characteristics and lifestyle of patients with HCC using sorafenib.

Material and Methods

This is a retrospective observational descriptive study, analyzing pharmaceutical records from a general hospital in Rio de Janeiro obtained during Pharmaceutical Care, between February 2020 and May 2023. The inclusion criteria were the pharmaceutical records of patients diagnosed with HCC using sorafenib. Pharmaceutical records of patients under 18 years of age were excluded. Data presentation and analysis was carried out using descriptive statistics. The present study was approved by the institution's Research Ethics Committee under opinion number: 40812020.6.0000.5252.

Results and Discussion

The pharmaceutical records of 60 patients were included, of which 44 were men (73.3%). The average age among participants was 68.2 years. The youngest patient was 31 years old and the oldest was 90 years old. This information is corroborated by scientific literature, which demonstrates that elderly patients are those who most often present with HCC (LAPORTE et al, 2013). Regarding racial identity, according to self-declaration, 32 (53.3%) are white, 10 (16.7%) are black and 18 (30.0%) chose the other option. Alcântara et al (2015) described in their study the race of patients with HCC, with 75% white, 8.3% black and 16.7% mixed race (ALCANTARA, 2023). Regarding the education of the study participants, the majority had incomplete primary education (n=19, 31.7%), followed by complete secondary education (n=15, 25%). According to Mendes et al (2016), patients who are candidates for liver transplants mostly studied until elementary school (54.12%) (MENDES et al, 2016). Regarding lifestyle habits, 10 patients, all men, declared themselves to be smokers, using an average of 10.31 cigarettes per day. Among the 60 patients, 5 men reported drinking alcoholic beverages, where the frequencies reported were: drinks every day: 1 (20%); drinks 3 to 5 times a week: 1 (20%); drinks only on weekends: 2 (40%); drinks very rarely: 1 (20%). Two male patients reported using psychoactive/recreational substances, one reported using cannabis daily and the other used cocaine only on weekends. Mendes et al (2016) found 11.76% of patients were smokers (MENDES et al, 2016). Of the 60 patients, 38 had a previous diagnosis of hepatitis. One patient (3%), male, had hepatitis A; 2 patients (5%), one man and one woman, had hepatitis B; and 35

patients (92%), 7 men (20%) and 28 (80%) women had hepatitis C. Fifteen patients, all male, were diagnosed with cirrhosis. Three patients, all men, underwent liver transplantation. Mendes et al (2016) described that among patients elective for liver transplantation, 25.88% have chronic liver disease related to alcoholic causes, 31.76% related to viral causes and 18.82% related to viral and alcoholic causes (MENDES et al, 2016). These data are in accordance with international literature, which indicates infection with hepatitis A, B, C, D and E viruses, in addition to cirrhosis of any etiology as risk factors for the development of HCC (CHAGAS et al, 2020).

Conclusion

Knowing the sociodemographic data and lifestyle of patients with HCC is necessary to help define the most effective communication with individuals affected by the disease and knowing their previous health history allows health strategies for this population to be developed and applied to ensure access, reduction of DRP, increased adherence and quality of life of patients.

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