High-Dose Interleukin-2 Administration in the Oncology Medical-Surgical Setting – An Innovation to Impact Cost Efficiencies, Clinical Outcomes and the Ideal Patient Experience

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7C Hematology/Oncology Unit Staff Members
Lehigh Valley Health Network, Allentown, PA

Objective
Discuss program components for successful administration of high-dose IL-2 outside the traditional step-down or critical care setting, in a 20-bed medical-surgical hematology/oncology unit.

Evidence and Background
IL-2
- Biotherapy that stimulates immune reaction
- Durable and complete responses in metastatic melanoma & renal cell carcinoma

Routine Administration
- Step-down or critical care unit
- No published reports in medical-surgical setting

Methods and Interventions
Goal
- Administer a maximum of 14 IL-2 doses

Staffing
- 2 patients to 1 nurse

Consistent Timed Therapy
- q 8 hours
- 3:00 pm; 11:00 pm; 7:00 am

Managed Solely by Attending Physician
- No residents or fellows

Routine Administration
- Strict fluid management
- Electrolyte replacement
- Oxygen titration
- Antiemetic administration
- Aggressive side effect management to allow next dose

Treatment Plan
1 Course
Cycle #1 – IL-2 Q 8 hours
Rest 7-10 days
Cycle #2 – IL-2 Q 8 hours
Rest 7-12 weeks

IL-2 Assessment Criteria

Patient Teaching Information

Key Factors for Success
- Private rooms
- Flexible staffing patterns to support 1:2 nurse/patient ratio
- Clinical practice guidelines with nurse driven protocols
- Commitment between nurses, providers and ancillary personnel to prioritize communication for the IL-2 patient
- Promotion of family presence - at patient’s bedside 24/7 and participate as partner in care

Outcomes
Patients Treated
- 43 stage-4 melanoma and 23 stage-4 renal cancer patients

Mortality During Treatment
- 0%
- 4 patient transfers to higher level of care
- 8 patients disease-free, equal to NCI national experience

PICC Line Infections
- 0% (n=300)

Average Length of Stay
- 4 days, comparable to the national average

Patient Satisfaction Scores
- Consistently mid-90’s, > peer group and Magnet™ hospital scores

References:

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