

## **How to work multiprofessionally in cases**

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A multidisciplinary approach to oncological patients is known to contribute to better treatment and patient's outcomes. The integration of the hospital pharmacist in the multidisciplinary teams is key in different contexts.

In colorectal cancer, where therapeutic algorithms are evolving to include several targeted agents and, increasingly more oral drugs, the pharmacist's contribution is an asset in improving patient outcomes and safety.

They can contribute by developing individual medication management programs, in collaboration with the oncologist, which include pharmacist appointments. The pharmacist, taking into account patients' comorbidities, and evaluating contraindications and interactions, can optimize treatment, even beyond to promote adherence to medication and help with education for its best use, especially in patients undergoing oral treatment.

In multidisciplinary therapeutic decision meetings, or even in Molecular Tumour Boards, we discover another opportunity to acknowledge the hospital pharmacist's importance, by discussing patients with need of specific therapies, some of which have restricted access, by assisting with different reimbursement schemes, overcoming obstacles and facilitating communication with committees and regulatory bodies.

Examples of collaboration and the pharmacist's contribution to the successful treatment of colorectal cancer, and improvement of patients' quality of life, will be discussed.