The novel viral disease (COVID-19) with pneumonia like symptoms was first detected in Wuhan City of China, later reaching a status of the pandemic. The corona virus is now found affecting people all across the globe that in turn, threatens a great majority of people, both healthy and diseased. In particular, the population of patient is at high risk of being inflicted with infection. The foregoing fact finds its base in a high intake of medication to treat the prevailing disease. It is suspected that potential medicine to counteract the pandemic may not be effective in such patients. A serious situation arises when dealing with cancer patients with deteriorating health and grave outcomes from COVID-19 infection. Most of the cancer patients are found visiting hospital for a routine checkup and chemotherapy. These visits enhance the chance of getting a disease as hospital presents a critical environment with respect to current pandemic and otherwise. However, cancer patients with high intake of cytotoxic agents and other anticancer therapies, present to be immune-compromised. Thus, the underlying malignancy and treatment associated to it put them at a high risk in the current health crisis. In addition to the stated reasons, various other factors also play role in the same presenting them with a probable twofold greater risk of contracting COVID-19 compared to the general population. Post WHO's declaration of Corona as pandemic, quite a steps are taken to prevent the spread yet a need lies to indicate and address its impact on cancer patients. This might need gross planning and steps like allocation of resources, availability of clinical care, and the need of developing a consent process in the midst of a pandemic. Currently and due to limited data, there are no sound guidelines to address such an issue providing solution and management of cancer patients in this particular or any other pandemic.1

Some of the mind tickling fears that the major concerns of many governments counts on overall impact on the health care delivery system. Issues like meager protective garments for front line workers, unexplored diagnostic testing with fewer intensive care units and limited capacity of hospitals in current status, poses a war like situation. In the same scenario, community of cancer patients is faced with a couple of unprecedented challenges. As per a report of the American Cancer Society, new cases reaching a toll of 5000 per day are suspected to arise in the United States. Moreover, the initial data presents pandemic as a lethal outbreak for cancer patients.2

The current phase of COVID-19 brings a major issue of availability of timely medication and health care services. This accounts for both reaching hospitals and getting due attention once reached within the hospital premises. While some of the services required at this time are in addition to the routine one's like added counseling of cancer patients. Also, adequate diagnosis of new cancer presenting cases followed by due treatment is needed.3

With advancement in time and medical facilities, health services have become patient oriented instead of disease oriented in majority of health care systems. With this an accordant rise and development is observed in the field of pharmacy. The conventional drug-based services have extended to patient-based services, catering needs of an individual patient. Situation alike current, presenting public health emergencies has seen collaboration of health professional from all backgrounds including pharmacists. It has brought in use the services of pharmacists. The domestic and foreign clinical pharmacists, collaborated together to take advantage of their pharmacology and therapeutic expertise to counteract COVID-19. At community level, pharmacist plays a role as emergency managing personnel playing an added responsibility in concoction to routine work. With their appreciable availability and skills, many of the issues are dealt at the point of care, strengthening the conventional healthcare system.4

With lock down enforced in almost all places in the world, the pharmacist is serving on front lines managing not only Corona related issues but also routine and emergency issues. This overall lowers the burden on emergency and other departments of the hospital. Role of community and clinical pharmacist has expanded and well utilized in this crucial time period,
sharing load of health care practitioners, keeping bed free for critically ill patients and cutting down the morbidity and mortality count. It is to note that pharmacies have served as the first point of contact for COVID-19 related health issues, helping people with safety guidelines and disease management. Recently, International Pharmaceutical Federation (FIP) came up with interim guidelines, chalk out the key functions of the pharmacists' and their professional responsibility whilst the current pandemic. With respect to oncology, role of the pharmacist is seen within the central services for compounding of cytotoxic drugs along with their clinical role of therapeutic drug monitoring (TDM). The concept of pharmaceutical care is introduced to better health outcomes via patient oriented treatments. In this instance, it aims at improving the safety of medications, bettering patients' health and overall revolutionized pharmaceutical care.

Clinical pharmacy (or clinical pharmacy services) is integrated in the health care system to present comprehensive management tools with use of medicine and patient care, covering a vast domain, entailing both community and hospital. Pharmacist services in oncology department cover medication reviews entailing chemotherapy and dose calculation. This also encompasses medication information to patients and staff, management of co-morbidity, therapeutic drug monitoring (anticancer drugs, immunosuppressive agents and anti-infective medicines in recipients of allogeneic stem cell transplantation), palliative and supportive care. Other roles like nutritional support, service for pain management and treatment of side effects of chemotherapy within economical scale is worth mentioning. With advent of improved and new medication, pharmacists are at a better position to council about use and administration, controlling and untoward reaction or adverse event. A clinical pharmacist, trained with additional skills and knowledge on oncology presents optimize solutions and stopping preventable adverse events, previously reported in the data. Central sterile services and improved infusion therapies with pharmaceutical care services in COVID-19 are a bonus for hospitalized cancer patients especially in the wake of pandemic and distinguishable from the past. This role is also extended among community pharmacists, supporting cancer patients with OTC drugs, minor emergencies and counseling on safe and effective use of both medicine and equipment. Moreover, their role in guidance to cancer patients and overall health awareness in corona outbreak is a plus for pandemic control.

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