



De Beste Spiegel: Dried Blood Spots als nieuwe manier om immuunsuppressiva te monitoren

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Overview



- Analysis of drugs in dried blood spots: steps to take
 - Method
 - Clinical validation
 - Patient instructions (card, video)
 - Logistics
 - Go-life
 - Pharmaco-economic evaluation
- Conclusions



Bloedspot = Home sampling!

 If the results are OK, an outpatient clinic visit can be avoided.





Dried Blood Spot analysis step by step

















Toegang tot uw medische gegevens? Vraag hier mijnUMCG aan.

Dat kan direct met een geldig legitimatiebewijs en mobiele telefoon.

Wij helpen u graag!







- Assay needs to be developed and analytically validated
- All necessary measurands need to be available in the ass
 - Step 1: clinical validation: demonstrate equivalence of method
 - Step 2: organise availability and distribution of DBS kits
 - Step 3: organise ICT so instruction letter for patient is printed and results are available for phycisian and for patients
 - Step 4: organise logistics with all partners involved, internally and externally
 - Step 5: develop easy-to-understand patient instructions and the structure of DBS before sending in

portbeelden.com

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DBS



- Development of the assay:
 - Not part of the implementation, development is a difficult track that took several years







Clinical validation tacrolimus and creatinine

• Is DBS result equal to a venanunction?







Patient training by instruction video







Sample logistics / ICT

- Availability of bloodspot kits for the patients
- Distribution of the bloodspot kits to the patients
- External logistics: KPN, special enveloppes
- Internal logistics of the samples
- Ordering and reporting results



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Real life results











Requirement:

 The patient should be able to decide at home if the sample is of sufficient quality to mail the card





- The app is a responsive web-based application accessible in a browser on smartphone/pc/tablet
 - Check RGB code pixels
 - Check roundness
 - Check size for punch
- Performance
- User friendlyness





Performance results

- Performance test on 221 samples
- Performance 90,0%
 - 4,1% false positive
 - 5,9% false negative
- 95,9% sending in good quality sample
- Patients rated the app as user friendy
- Sufficient for clinical application









Cost-effectiveness

- Randomised trial
- 25 patients classical way trip to hospital for venapuncture
- 25 patients DBS
- Aim:
 - 20% reduction in outpatient clinic visits
 - Increase of patient satisfaction





- Interim results
 - No difference in outpatient clinic visits
 - Increased patient satisfaction
- Remarks/discussion cost-effectiveness:
 - KPN and internal logistics for DBS hard to organise, DBS results were often too late
 - DBS not suitable early after transplant, possibly in later phase when outpatient clinic visits are less frequent



Conclusions DBS



- Development of assay for DBS sampling by transplant patients is feasible, however not for every compound
- Home sampling possible using DBS, proper quality control is needed
- Quality control of sampling is possible by App
- Results are not suitable for making clinical decisions in the early phase after transplantation
- Operational in UMCG for patient monitoring of immunosuppressants, TB drugs, antifungal drugs, clozapine
- Logistics is a headache dossier if time to result is critical such as the early phase after transplant





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Stellingen

- DBS is alleen zinvol indien alle noodzakelijke parameters erin gemeten kunnen worden
- DBS is alleen zinvol als de patiënt thuis kan controleren of de kwaliteit van het monster goed is
- DBS is alleen zinvol bij optimale externe en interne logistiek
- DBS is alleen zinvol bij polikliniekbezoek interval >1 week