Immunotherapy Summit

Proceedings and identified priorities for safe administration and care

Michele Galioto, RN, MSN, John Mucenski, BS, PharmD, and Kathleen Wiley, RN, MSN, AOCNS®

BACKGROUND: Oncology nurses play a significant role in ensuring optimal care coordination for patients receiving immunotherapies.

OBJECTIVES: The Oncology Nursing Society hosted an immunotherapy summit in March 2018. Summit attendees identified and prioritized several critical resource needs to best support oncology nurses administering immunotherapies and caring for patients receiving these therapies.

METHODS: Priorities address care coordination: immunotherapy-specific education for healthcare professionals, patients, and their caregivers; and appropriate assessment, intervention, and documentation to contribute to the science of immunotherapies.

FINDINGS: This article summarizes summit proceedings and priorities for safe administration and care related to immunotherapies.

KEYWORDS

immunotherapy; oncology nurses; immune-related adverse events

DIGITAL OBJECT IDENTIFIER 10.1188/19.CJON.E60-E65

THE ONCOLOGY NURSING SOCIETY (ONS) CONVENED a group of ONS members in March 2018 for an immunotherapy summit to determine the needs of oncology nurses caring for patients receiving immunotherapies. Summit attendees were asked to identify priorities to address gaps in needed resources, partnerships, and products. Attendees were ONS members with clinical immunotherapy experience and represented advanced practice nurses, clinical trials nurses, nurse navigators, and staff nurses from community, academic, and comprehensive cancer centers. One ONS member, a PharmD, contributed pharmacy expertise. Attendees participated in panel discussions and finalized a list of priority action items to support current and future nursing practice.

Summit proceedings are organized into four sections: cancer therapies and nomenclature, combination therapies, immune-related adverse events (irAEs), and cellular therapies. Immunotherapy-related terminology can be found in Figure 1. Attendees emphasized the need to support clinicians across care settings to bridge care for all patients receiving immunotherapies.

Cancer Therapies and Nomenclature

Cancer therapy nomenclature is the set of terms used to describe treatment options. The following are five pillars of cancer therapy (Farkona, Diamandis, & Blasutig, 2016; Galluzzi et al., 2014):

- Surgery
- Radiation therapy
- Chemotherapy, including alkylating agents, antitumor antibiotics, corticosteroids, mitotic inhibitors, and topoisomerase inhibitors
- Targeted therapy, including hormonal therapy, signal transduction inhibitors, gene expression modulators, and apoptosis inhibitors
- Immunotherapy, including cytokines, dendritic cell vaccines, oncolytic vaccines, biological response modifiers, monoclonal antibodies, immune checkpoint inhibitors, and cellular therapies, including hematopoietic stem cell transplantation and chimeric antigen receptor (CAR) T-cell

Summit attendees noted that peers often reference cancer therapies in less specific terms, often grouping therapies under the general term of chemotherapy. Attendees determined that generalizing therapies under one specific