Title: Educational Intervention to Improve Understanding and Willingness to Use Ketamine in Supportive and Palliative Oncology

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Problem Statement: Severe treatment-resistant depression accompanied with suicidal ideation is challenge in the supportive, palliative care setting. Because serious major depression can worsen suffering in oncology patients and there are limited interventions that work quickly, novel treatment interventions, like ketamine, need to be studied and implemented in this population.

Background: The rate of completed suicide in an oncology population is twice that of the general population. A single dose of intravenous (IV) ketamine is safe and effective at rapidly, though temporarily, decreasing suicidal ideation and significantly improving severe depression symptoms. Spravato (esketamine) has been recently FDA approved for treatment-resistant depression with suicidality. Research has found that ketamine assisted psychotherapy can increase the durability of its' effects.

Purpose: This educational project's goal is to improve healthcare providers' understanding and reduce barriers to ketamine's use in patients with treatment-resistant depression with suicidal ideation in a supportive/palliative oncology setting.

Methods: Three 45-minute hybrid in-person and virtual lectures in Spring 2023 discussed the scope of depression in oncology patients and suggested a protocol for both single dose IV ketamine and full course intranasal esketamine treatments. Concurrently, an abbreviated lecture and recommended protocol was presented to both Oncology and St. Luke's Systemwide Pharmacy/Therapeutics Committees asking for approval to use ketamine in our setting. A 10-item survey was distributed to determine healthcare providers' knowledge and willingness to recommend ketamine use.

Findings: Thirty-four healthcare providers attended the lectures. Concern about ketamine use decreased, understanding about safety and efficacy of ketamine increased, and there was increased willingness to recommend ketamine treatment to our oncology patients. Both IV ketamine and intranasal esketamine have been approved for treatment-resistant depression and suicidality at St. Luke's Cancer Institute.

Practice Implications: Brief educational opportunities can increase knowledge and willingness to provide novel treatment modalities to a highly distressed, vulnerable supportive/palliative oncology patient population.