Clinical Context: Cancer patients with Febrile Neutropenia differ in risk profiles. Ability to stratify them enables treatment to be tailored accordingly.

Significance: Improved patient clinical outcome; optimal utilization of health care resources & improved quality of life.

Review Questions: What are the prognostic indicators predictive of chemotherapy-induced febrile neutropenia outcomes (favourable and unfavourable) among adult cancer patients?

Background: Febrile Neutropenia (FN) is a major complication for cancer patients undergoing chemotherapy. It is associated with significant morbidity and mortality. Standard patient care includes prolonged hospitalization and parenteral antimicrobial therapy.

However, patients can be stratified into: high risk (developing clinical deterioration) and low risk (uneventful recovery) groups. FN patients are managed with risk-based therapy.

A systematic review to examine current available evidence of significant variables associated with both FN outcomes is needed. This information is pertinent in the development of a highly sensitive and reliable prognostic model.

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Methods:

Types of Participants
Adults, 18 years and above, with FN from chemotherapy

Phenomena of Interest
Prognostic indicators (clinical and laboratory) predictive of chemotherapy-induced FN outcomes

Types of Studies
Experimental and observational; published and unpublished, English only

Types of Outcomes
Prognostic indicators predictive of FN outcomes (favorable and unfavorable) that influence the incidence of morbidity and mortality of cancer patients with FN.

Review Status
Search and assessment of studies

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Author’s contact: yee.lee@adelaide.edu.au

Reference: