

Adherence to Oral Molecularly Targeted Therapy in Metastatic Renal Cell Carcinoma: A Qualitative Study

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Introduction. Adherence to oral therapy is a major challenge in oncology, particularly for patients with metastatic renal cell carcinoma receiving molecularly targeted treatments at home. Regular medication intake, independent management of adverse effects, and integration of treatment into everyday life make adherence an important determinant of clinical outcomes. This study aimed to explore patients' experiences of adherence to oral therapy and identify factors that facilitate or hinder treatment continuity.

Methods. A single-centre qualitative study with a descriptive–inductive approach was conducted and reported with reference to the COREQ checklist. Adult patients receiving oral molecularly targeted therapy were recruited from the Oncology Day Hospital of the Regina Elena National Cancer Institute in Rome. Data were collected through semi-structured interviews and examined using Ritchie and Spencer's Framework Analysis to identify recurrent themes and interpretative patterns.

Results. Thirty-one patients, predominantly men, were included, with a mean age of 69.3 years. Six principal themes emerged: barriers to adherence; obstacles related to adverse effects, forgetfulness, and disruption of daily routines; facilitators, including family support, trust in healthcare professionals, and perceived treatment benefits; the emotional impact of adherence; the perceived relationship between adherence and quality of life; and the role of awareness and attentiveness in treatment management.

Discussion. Adherence to oral therapy emerged as a dynamic and multidimensional process influenced by cognitive, emotional, and relational factors. The transition towards home-based treatments requires a patient-centred care model integrating effective communication, proactive toxicity management, therapeutic education, and empathic support. Personalized, multidisciplinary strategies may strengthen patient empowerment, therapeutic alliance, and continuity of treatment.

Keywords: Medication Adherence, Antineoplastic Agents, Kidney Neoplasms, Oral Administration, Qualitative Research

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