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PHARMACOLOGICAL STUDY OF HIV PATIENTS ENTERED INTO THE HOSPITAL

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Background and purpose

A hospital admission of HIV patients can cause imbalances that affect the immune status of the patient, even forcing to modify its anti-retroviral

therapy (ART). The aim of this study is to analyze several parameters: reason for admission, virological and immunological status at admission, ART used during admission, possible drug interactions and adherence to treatment before and after admission.

Material and methods

Study period: August 2017 - December 2017

Checked: medical history and medical prescription during the admission Adherence to treatment was calculated in the three months before and after admission.

Results

Total: 48 patients

Treatment

The ART was modified to 20% of the patients during the admission, mainly due to

inefficiency and the appearance of resistances. In 5 cases, the patient did not take any

antiretroviral treatment and was instituted at the time of admission.

Adherence

Patients had an average adherence before admission of 94%. However, after admission, the adherence of all patients was lower. Even in 7 patients the adherence dropped more than 10%.

Drug interactions

Were found 18 relevant clinically interactions. The most common were associations of protease inhibitors with benzodiazepines (12 patients). In 3 patients were detected combinations of drugs not recommended in clinical practice guidelines because of increased risk of Q-T interval. This was the case of darunavir / salmeterol association.



Hospital admission of HIV patients is related to the poor virological and

immunological status of the patient. Adherence is affected and the

incidence of adverse effects is also important.



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