

## BACKGROUND AND IMPORTANCE

The COVID-19 pandemic had a dramatic impact on worldwide health services. Clinical treatments, hospitalized patient management and the need to guarantee the quality of care for COVID-19 patients were the main challenges.

Hospital at home (HaH) Unit has already demonstrated efficacy, safety and economic advantage compared to conventional hospitalization. To reduce the pressure of care in hospitals caused by the pandemic, the HaH COVID Unit was created.

Structuring a multidisciplinary team is essential to ensure the best results, reduce mortality and the response in the control of the pandemic. In this sense, pharmacists were involved in developing Covid-19 treatment protocols (C19TP) for patients transferred to HaH COVID Unit to finish their therapy (corticotherapy and antibiotherapy) at home.

## RESULTS

165 patients were admitted to the HaH COVID Unit (21 in 2020 and 144 in 2021), to complete the C19TP.

Strategic implementation of home visits clearly impact on the hospital beds capacity.

## AIM AND OBJECTIVES

Characterize C19TP and strategies implemented to optimize medication dispensing for COVID-19 patients.

## MATERIAL AND METHODS

Clinically stable COVID-19 patients were admitted to complete home C19TP between April 2020 and August 2021. On average, medication was dispensed for 5 to 7 days. The developed strategies were:

- Multidisciplinary cooperation in monitoring COVID-19 patients mostly through telemonitoring and telephone consultations (figure 1 and 2);
- Ensure availability and safe use of drugs;
- Perform protocols for therapeutic management of COVID-19 patients.

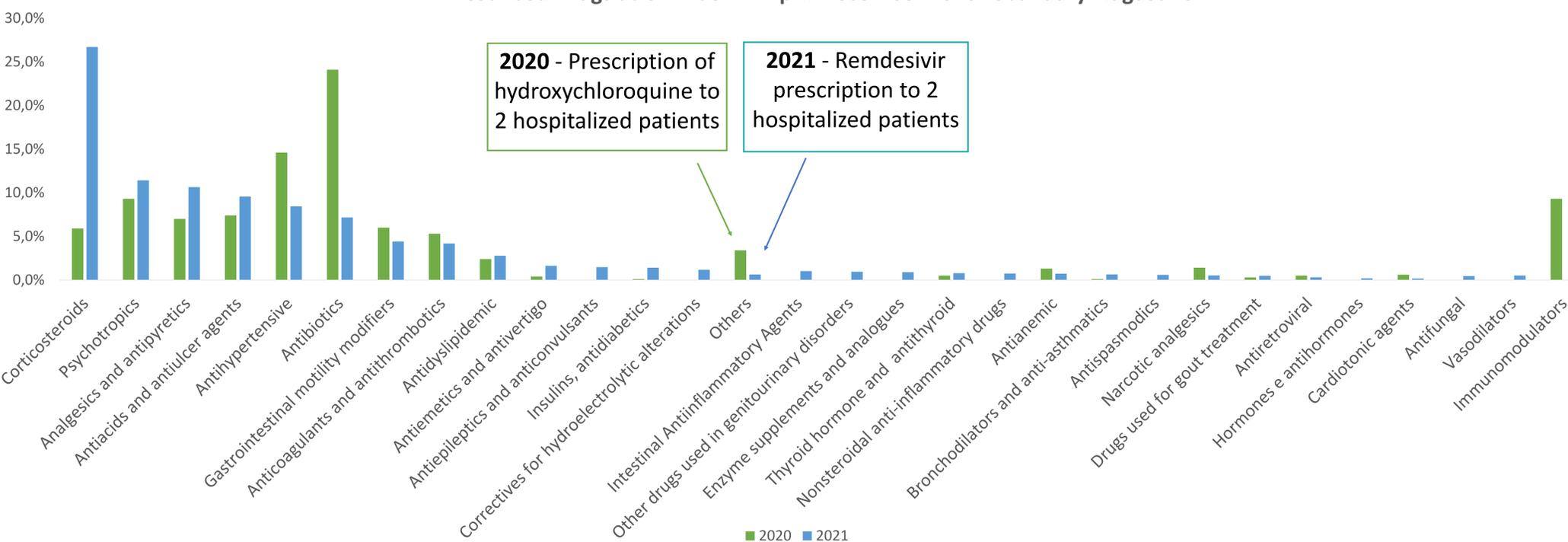
The therapy mostly included corticosteroid therapy :

- 2020 – 28,6% of which 83,3% oral prednisolone
- 2021 – 70,8% of which 74,1% oral dexamethasone 6 mg

Patients completing C19TP with antibiotherapy:

- 2020 – 85,7%
- 2021 – 22,9%

Prescribed Drugs at UHD COVID April-December 2020 vs January-August 2021



Graph 1 – Comparison of drugs prescribed at UHD COVID between April to December 2020 (21 hospitalized patients) and January to August 2021 (144 hospitalized patients)



Figure 1 – Nursing team monitoring patients admitted to the UHD through telemonitoring



Figure 2 – Patient admitted to the UHD recording blood pressure using telemonitoring

## CONCLUSION AND RELEVANCE

HaH COVID Unit is a safe and effective option in patients carefully selected with COVID-19.

Collaborative and multidisciplinary management could have a great impact on the improvement of healthcare provided to COVID-19 patients.

Pharmacists should actively participate in therapeutic decisions, in the formulation and adjustment of therapeutic regimens for the COVID-19 patients, ensuring the monitoring, evaluation of the safety of the medication, efficacy and management of drug interactions.

## References

- Elbeddini *et al*, Pharmacists and COVID-19, Journal of Pharmaceutical Policy and Practice (2020) 13:36
- Song *et al*, Hospital pharmacists' pharmaceutical care for hospitalized patients with COVID-19: Recommendations and guidance from clinical experience, Research in Social and Administrative Pharmacy 17 (2021) 2027-2031