

PHARMACEUTICAL INTERVENTIONS IN A NON-ONCOHAEMATOLOGICAL DAILY HOSPITAL

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BACKGROUND AND IMPORTANCE

The role of the pharmacist in the validation and dispensing of medication is already known. But the increasingly frequent use of high-cost drugs makes that role essential for the sustainability of health systems.

AIM AND OBJECTIVES

To describe and analyse the pharmaceutical interventions carried out in a non-oncohaematological daily hospital (NOHDH). To evaluate the economic impact of these interventions.

MATERIALS AND METHODS

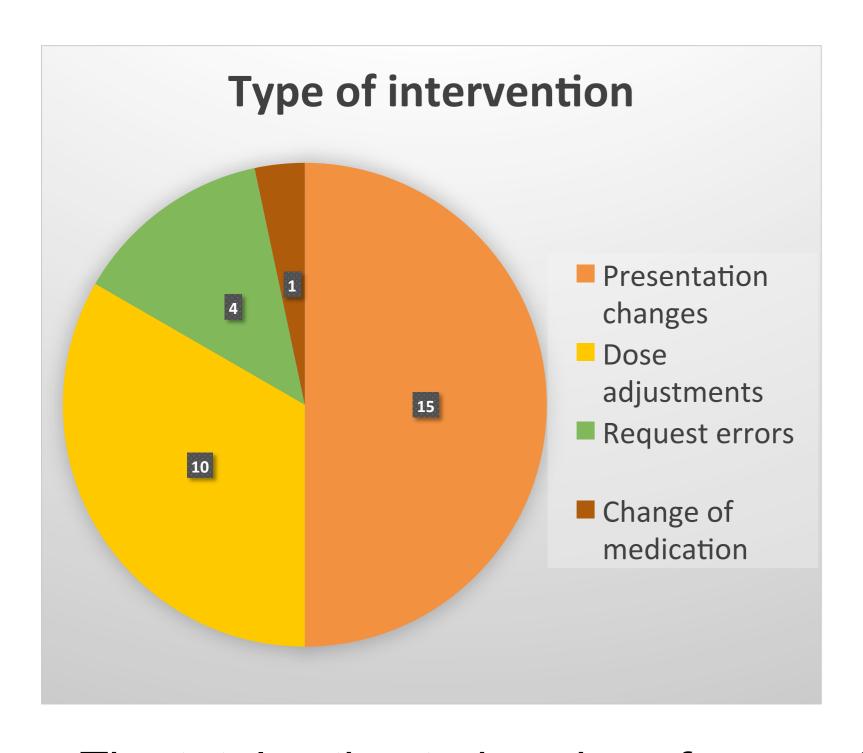
Pharmacist's interventions in a nononcohaematological daily hospital (April 2019 - March 2020)

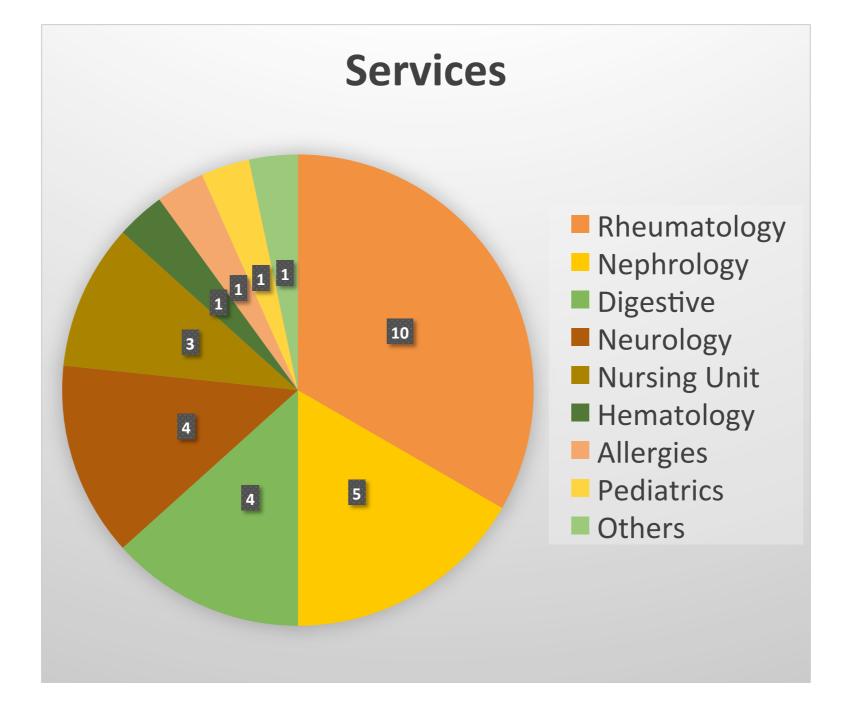


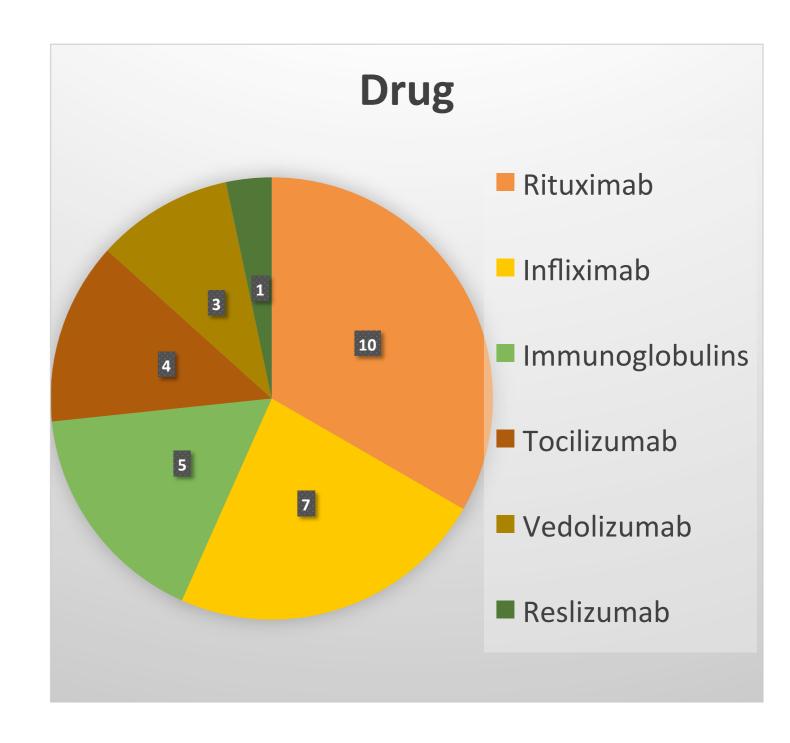
It should be mentioned that preparation of the infusions is not centralized in the pharmacy but is carried out in the daily hospital units. Infusions prepared in the pharmacy, acute treatments, and intravenous iron were excluded. To calculate the economic impact, only the dose to be administered and the average cost of drugs during the year of the study were considered.

RESULTS

- 30 interventions were carried out in 434 patients (6.9% patients) and 2240 dispensations (1.3% dispensations).
- 29 of them were accepted (97%).
- Classification of interventions according to:







The total estimated savings from performing the interventions was 12,186.9€ (406.2 €/intervention).

CONCLUSION AND RELEVANCE

- Approximately half of the interventions carried out consisted of the exchange to the biosimilar drug, after consensus.
- Although the number of interventions is low, their economic impact is important.
- Despite not being able to prepare these medications centrally and individually, the validation of the prescription and monitoring of the dispensations by the pharmacist is essential.

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