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## BACKGROUND

The emergence of information and communication technologies has enabled the development of telepharmacy programmes (TPP) as a complementary tool to personal care, through which pharmaceutical care can be provided without the need to visit the hospital.

## OBJECTIVES

Describe the pharmaceutical interventions (Pis) of patients included in a TPP.

## MATERIAL AND METHOD

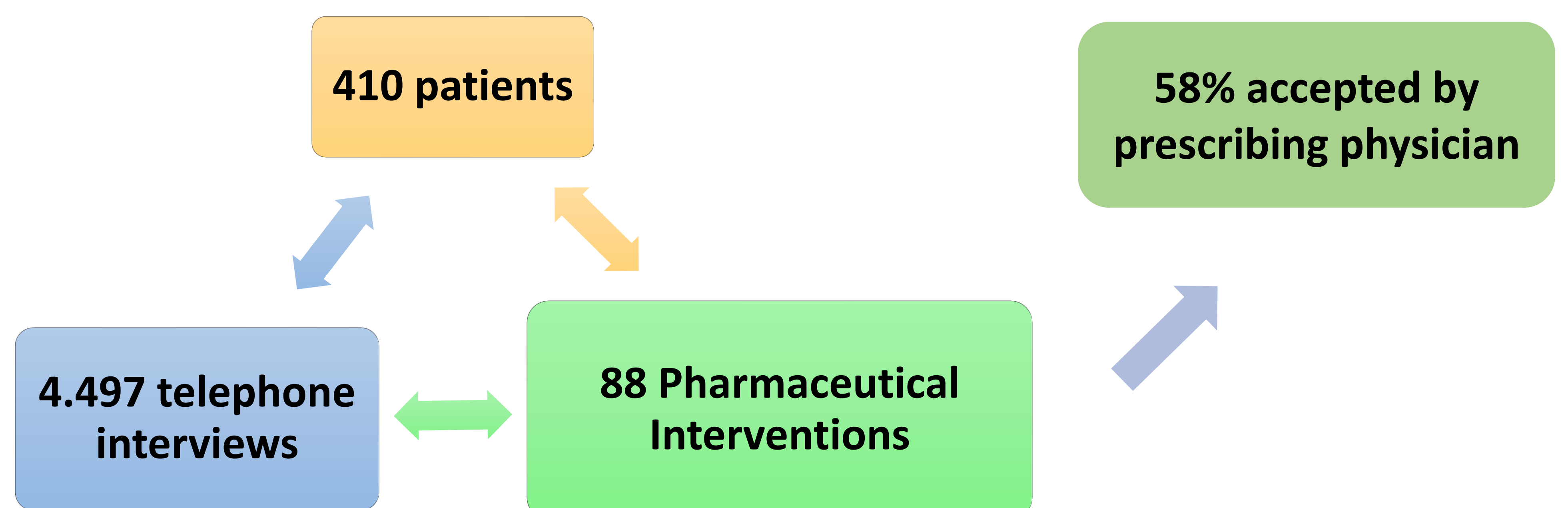
Prospective, descriptive study, from December 2019 to September 2022. Pharmacotherapeutic follow-up consisted of scheduled and structured telephone interviews with a maximum period of 3 months and sending hospital medication to the primary care health centre. **Inclusion criteria:** duration of treatment  $\geq 3$  months, stable chronic disease, adherence  $\geq 90\%$ , good tolerance to medication and/or mobility or dependency problems.

Pis classified	Results
-Drug-drug interactions (DDI)	-Temporary/permanent discontinuation
-Adverse drug reactions (ADR)	-Change of treatment
-Lack of efficacy (LOF)	-Change of dosing regimen
-Lack of clinical follow-up (LOCFU) > 1 year	-Continuation of treatment

## RESULTS

### TREATMENTS

- Biologics 57%
- Antiretrovirals 27%
- Multiple sclerosis/amyotrophic lateral sclerosis 6%
- Lipid-lowering drugs 3%
- Somatropins 3%
- Pulmonary antihypertensives 2%
- Others drugs 2%



N	ADR (27) (30,7%)	CM (27) (30,7%)	LOF (19) (21,6%)	DDI (15) (17%)	TOTAL
Temporary/permanent discontinuation	6 (22,2%)	6 (22,2%)	2 (10,5%)	0	14 (15,9%)
Change of treatment	7 (25,9%)	1 (3,7%)	9 (47,4%)	1 (6,7%)	18 (20,5%)
Change of dosing regimen	2 (7,4%)	1 (3,7%)	2 (10,5%)	14 (93,3%)	19 (21,6%)
Continuation of treatment	12 (44,4%)	19 (70,4%)	6 (31,6%)	0	37 (42%)

## CONCLUSIONS

- Pharmacotherapeutic monitoring of patients included in the TPP mainly allowed for the detection of ADRs and ensured adequate clinical supervision of in-patient medication.
- The outcome of the interventions was mostly COT followed by modification of the prescribed regimen.
- The pharmacist's activity in a TPP can contribute to a better use of medicines, as well as to prevent and solve medication-related problems.

