



IM PLEM ENTATION OF A SAFETY AND HEALTH PROGRAM FOR THE MANAGEMENT OF PATIENTS WITH HEPATITISCIN TREATMENT WITH DIRECT-ACTING ANTIVIRAL AGENTS

iPharma

G-M

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WHAT WAS DONE?

We have developed a pharmaceutical care program.

- The following protocols were defined:
 - ✓ A case selection and treatment guideline
 - ✓ A protocol for the management of clinically relevant drug interactions
 - ✓ A protocol with recommended dosages and administration techniques
 - ✓ A protocol for the management of adverse drug events
 - ✓ A protocol about clinical interview in order to ensure patient literacy
 - ✓ Patients information leaflets

The Pharmacy Department was provided with:



3 Full-time Pharmacists



2 New patient information offices in the **Outpatient Unit**

- Appointment scheduling: Pharmacy visits are scheduled after the Hepatologist/Infectious disease specialist appointments every 28 days.
- The clinical interviews are documented in the electronic health record.



A Queue Management System



Chronic hepatitis C (CHC) affects approximately 3% of the world's population. The development of well-tolerated and effective Direct-Acting Antiviral Agents (AADs) has changed the therapeutic landscape. These therapies have a high efficacy with a good safety profile. Numerous challenges in terms of patient education, monitoring, medication errors, drug interactions and adherence exist. Our National Health System launched in April-2015 a Plan for a proper CHC management, establishing measures to optimize the AADs use.

WHY WAS IT DONE?

HOW WAS IT DONE?

A multidisciplinary team was formed with:



3 clinical pharmacists, 2 hepatologists,

1 infectious disease specialist and 1 nurse

Address the key points associated with the safe and efficient use of AADs and to create a useful clinical guideline.

Identify staffing, logistics and management needs for its implementation.

WHAT HAS BEEN ACHIEVED?

No.patientsinduded in the program	674	No.(%)pharmacist interventions accepted	194 (99%)
No.initial visits	674	Average waiting time to be attended	15'
No.follow-up visits	1,750	No.queries made to hospital pharmacist	84
No.patients attended/day	19,9	No.Adverse Drug Events reported to the	04
No.(%)adherent patients	412/412 (100%)	Pharmacovigilance Centre	31
No.pharmacist interventions	195	Cost savings(€)	121,194

WHAT NEXT?

This initiative provides a set of recommendations regarding CHC management and a support guide to standardize and guarantee a quality pharmaceutical care.

The next step is to develop programs for the management of other pathologies following the same methodology that we have used for this initiative.

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