4CPS-068

L01 ANTINEOPLASTIC AGENTS

CONDUCTION OF AN AUDIT TO REDUCE THE ECONOMIC LOSS DUE TO UNUTILIZED ONCOLOGICAL DRUG PREPARATIONS

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Background and importance

The costs related to unutilized oncological drugs preparations have the greatest impact on the expense of a hospital. In order to reduce wastes, it's possible to act on procedure that leads to failure to administer an already compounded oncological drug.

This represents an economic loss for hospital.

Aim and objectives

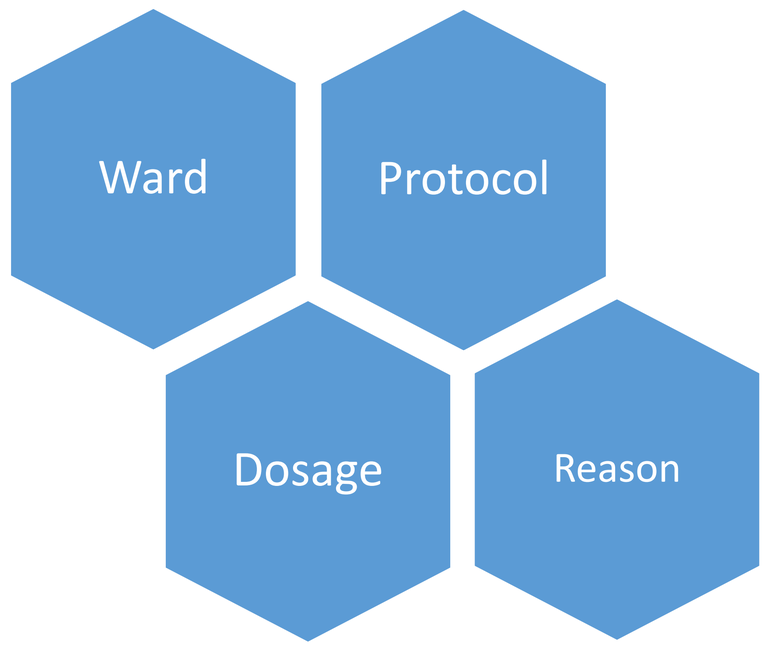
The aim of the study is to identify the reasons that led to the failure to administer the compounded oncological drugs, in order to reduce errors and, wastes and economic loss

Material and methods

Period of study

January – August

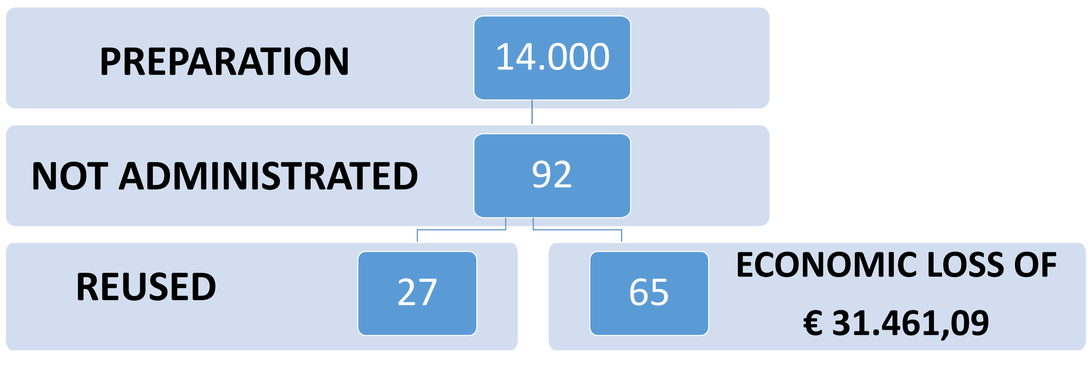
Data collected for the study

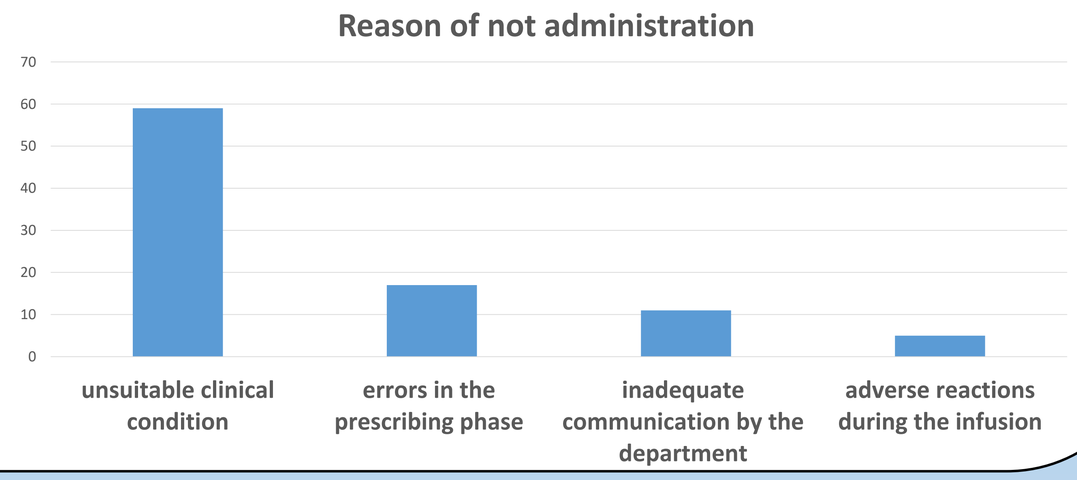


The analysis was conducted between January-August 2022. Data were collected through an array including protocol, dosage, ward and reason for non-administration. It also included whether the drug had been reused (totally or partially) or thrown away and the economic loss. To conduct the analysis an audit was carried out between doctors, pharmacists and nurses aimed at identifying both the reasons that causes the economic loss and possible improvements.

Results

Of 14.000 preparations, 92 were not administered; 27/92 were totally or partially reused, 65/92 were thrown away causing an economic loss of € 31.461,09. The reasons that led to the non-administration were mainly attributable to the unsuitable clinical condition of the patient at the time of administration (64%-59/92). In 19%(17/92) of cases the administration was not carried out due to errors in the prescribing phase (therapeutic indication inadequate to the protocol, absence of off label authorization, etc.). In 12%(11/92) of cases, the cause was inadequate communication by the department (therapy confirmed in the absence of the patient). 5%(5/92) of cases were caused by interruption of administration due to adverse reactions during the infusion.





Conclusion and relevance

The results obtained have highlighted the interventions needed. It would be advisable for the confirmation of the therapy to take place on the same day as the specialist visit and clinical tests. In this way, waste related to the patient's non-presentation and/or the presence of clinical conditions incompatible with the administration would be avoided. It is also important that the validation of a protocol is carried out by at least two specialists (including an oncologist) in order to avoid inappropriate prescriptions.