

PHARMACOVIGILANCE 2018: SURVEY ON THE PERCEPTION OF PHARMACOVIGILANCE IN THE HOSPITAL - TOOLS TO ENHANCE THE ADVERSE DRUG REACTIONS REPORTING

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Background

Hospital pharmacovigilance (PV) has always shown an **irregular trend**. High increases in the use of Adverse Drug Reactions (ADR) reporting are often recorded during the times in which also **ad hoc surveillance projects** are carried-out.

Objectives

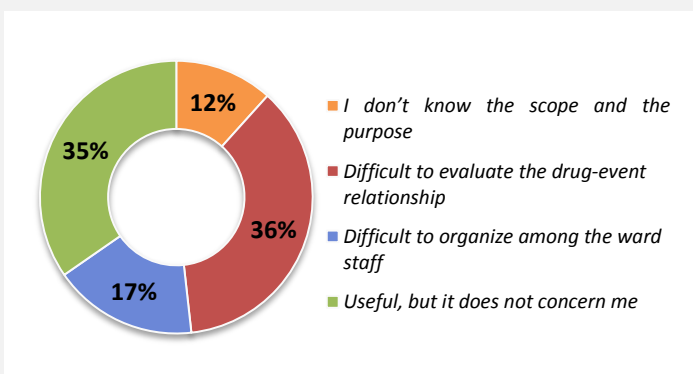
The purpose of the survey was to suggest the use of some practical and quick tools that could **help** the staff of the hospital **reporting the ADRs** in a continuous and spontaneous way, without interfering in the ordinary management of the patients.

Material and methods

The entire staff of Carlo Poma hospital (Mantova, Italy) was asked to take part in an **anonymous survey** sent by company e-mail. The survey consisted of **15 questions**. The first part of the questionnaire inspected the meaning of ADR, while the second one examined useful tools for the encouragement of the surveillance. The results were analyzed through Microsoft Excel and LimeSurvey.

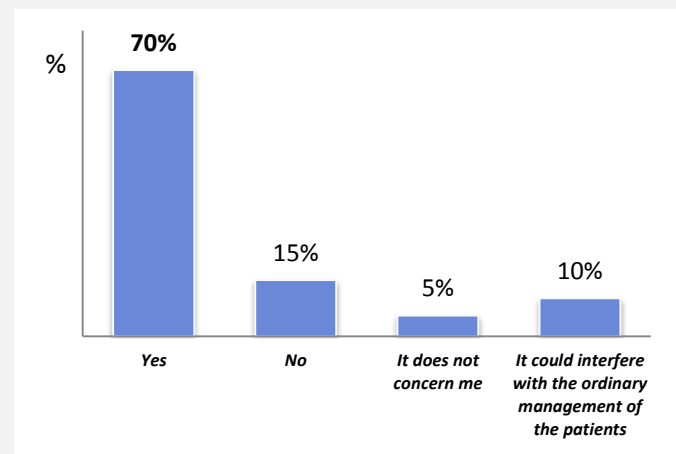
Results

- Participation rate of **27,3%** (730 received surveys over a total of 2672).
- **31,23%** of the participants know the **correct meaning of ADR**.
- **69,32%** have **never reported** an ADR.
- Hospital professionals' perception of PV:

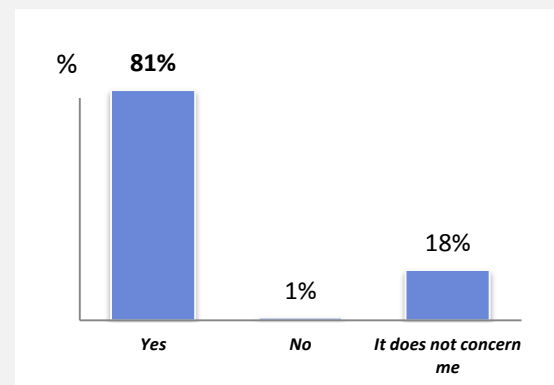


- Professionals' opinions about the **tools suggested** to enhance the ADR reporting:

A. Presence of the Qualified Person responsible for Pharmacovigilance (QPPV) in the ward



B. Tick in the software for the patients management to notify an ADR



Conclusion

The analysis of the results shows that the **promotion of PV knowledge** is strongly suggested. The periodic **presence of the QPPV** in the ward could support the staff in the comprehension of the reporting procedures and the identification of the ADRs.

Furthermore, it is recommended to add a **checkbox** for the ADRs in the software for the patients management to promote the use of such activity in the long term. In addition, the QPPV should have **access to medical reports** and useful data so that they could provide thorough and high-standard ADR reports.

References

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- Croesi B, Guarnone E, Calvi M. Farmacovigilanza: le cause della sotto-segnalazione nella fondazione IRCCS Policlinico San Matteo di Pavia. *Giornale Italiano di Farmacoeconomia e Farmacoutilizzazione* 2012; 4 (4): 49-59.

