19th

ADEQUACY OF INTRAVENOUS IMMUNOGLOBULIN PRESCRIPTION AT A TEACHING HOSPITAL



H.U. Puerto Real. Hospital Pharmacy.

C. Palomo-Palomo, M.J. Gandara-LadrondeGuevara, C. Martinez-Diaz, J.C. GarciadeParedes-Esteban, J.F. Lopez-Vallejo, M.A. Blanco-Castaño, E. Rios-Sanchez, J. Diaz-Navarro, E.J. Alegre-DelRey, J.M. Borrero-Rubio

BACKGROUND

Intravenous immunoglobulins (IgIV) represent a therapeutic option with high cost and limited availability, as a consequence it is necessary that we evaluate their use basing on the scientific evidence and priorizing the indications

MATERIALS AND METHODS

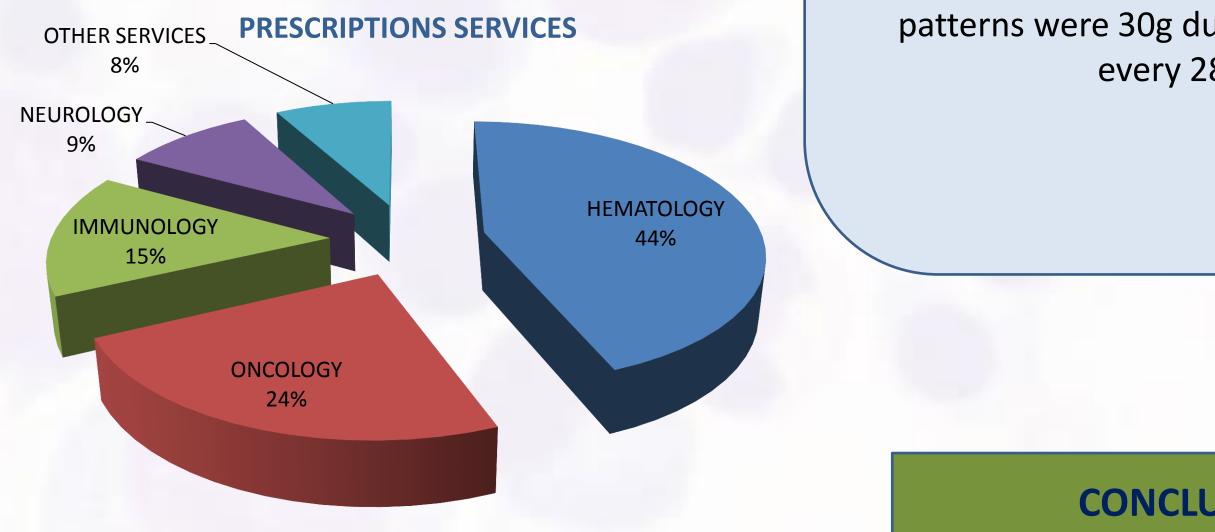
We have study patients treated with IgIV since January 2012 to June 2013. In order to study the adequacy rank of the prescriptions we used *The Clinical Guidelines for* Immunoglubulin Use edited by the British Department of Health. We registered the prescriptions services, prescriptions indication, dosing regimens and approved or not approved indications

PURPOSE

Study the adequacy rank of prescriptions of immunoglobulins to the indication and dosage recommended.

RESULTS

A total of 34 patients were treated with a standard dose of 0.4 g / kg. The distribution of patients according to the prescribing indication was: idiopathic thrombocytopenic purple (38%), primary immunodeficiencies (23 %), secondary immunodeficiencies (15%), autoimmune hemolytic anemia (6%), Rasmussen's syndrome (3%), and others (15%). 91% of the prescriptions were approved indication, 3% were approved but not scientifically supported and 6% not approved or accepted. The most frequently patterns were 30g during 4 days and 35g every 28 days.



CONCLUSIONS

-Most of the prescriptions were authorized indications.

-A low percentage of prescriptions were for unapproved indications, which were required as compassionate use.

-The pattern and duration of treatment were appropriate to the treated pathologies.

