



# Analysis of oral immunosuppresants use in off-label indications in a hospital pharmacy service

CP-064

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## Background

Hospital Pharmacy Service (HPS) participate in the authorization process of off-label indication (OLI) drugs. Immunossuppressants are often used as OLI.

## Purpose

Analyse dispensations of oral immunosuppressants as OLI in our Outpatient Unit of a HPS (OUHPS) to identify improvement points in the circuit.

### Material and methods

Retrospective study of oral immunosuppressants dispensations at our centre between March 2012 and March 2014. Variables collected were age, sex, drug, prescribing service and indication; obtained from the database of the OUHPS and the electronic medical history.

#### Results

269 patients (median age of 52 years (5-92), 135 women (50%) and 134 men (50%)) were evaluated.

6 drugs were dispensed in 8 different medicinal products.

Oral inmunosuppressants dispensed as OLI

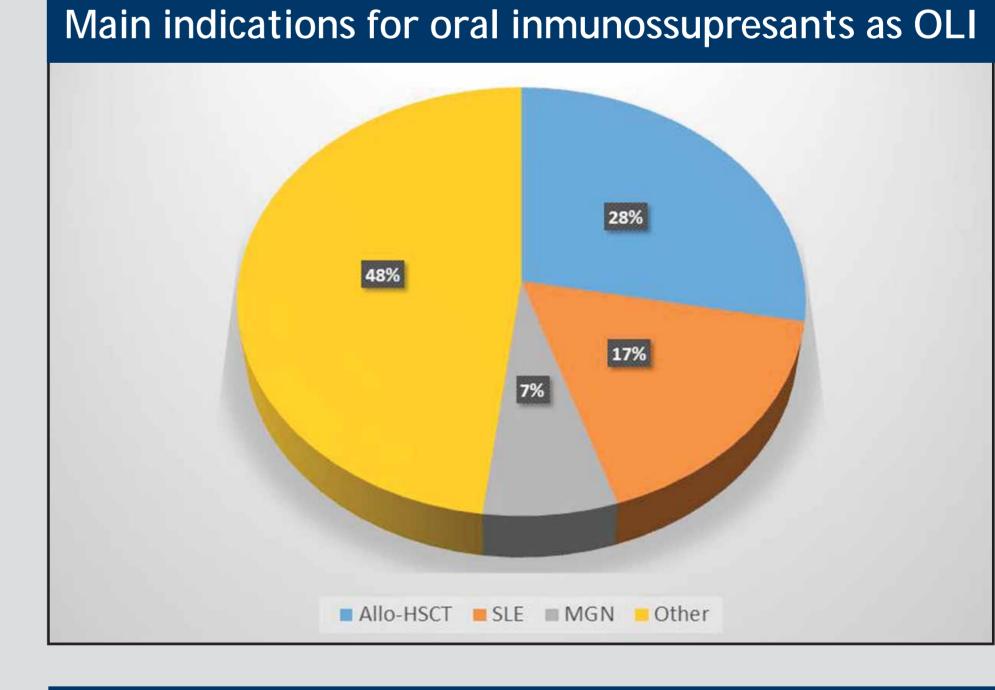
DRUG	NUMBER OF PATIENTS	%
Tacrolimus	94	35
Mycophenolate mofetil	78	29
Mycophenolic acid	56	21
Cyclosporine	34	17
Everolimus	6	2
Sirolimus	1	0.3

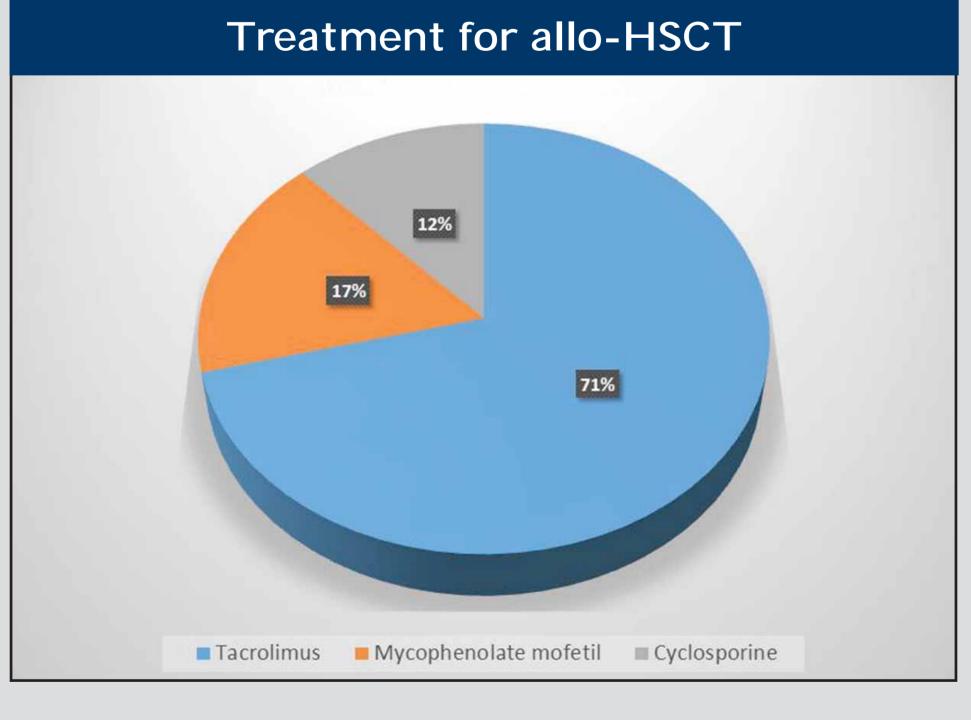
11 services were involved.

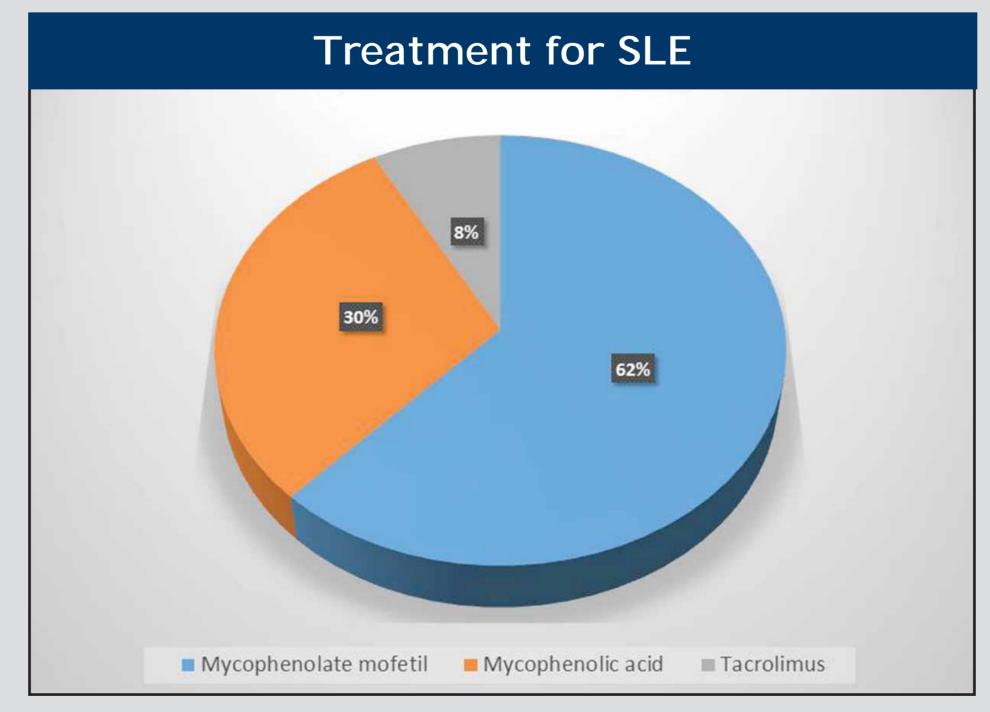
Services that use oral inmunosuppressants as OLI

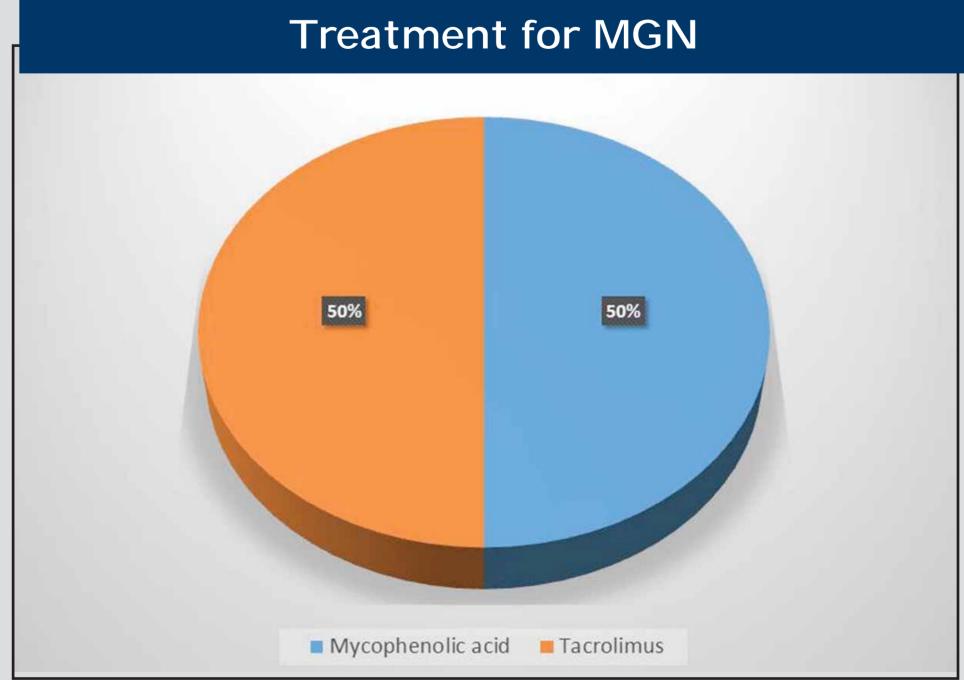
SERVICE	NUMBER OF PATIENTS	%
Haematology	89	33
Rheumatology	61	23
Nephrology	56	21
Ophthalmology	15	6
Digestive	14	5
Pneumology	10	4
Paediatrics	9	3
Neurology	8	3
Internal Medicine	4	1
Dermatology	2	0.7
Oncology	1	0.3

Immunosuppressants were dispensed for 35 different indications. Main indications and their treatments were: Allogeneic Hematopoietic Stem Cell Transplantation (allo-HSCT) for 75 patients (28 %), with tacrolimus (71 %), mycophenolate mofetil (17 %) and cyclosporine (12 %); Systemic Lupus Erythematosus (SLE) for 46 (17 %), with mycophenolate mofetil (62 %), mycophenolic acid (30 %) and tacrolimus (8 %) and Membranous Glomerulonephritis (MGN) for 20 (7 %), with mycophenolic acid (50 %) and tacrolimus.









#### Conclusion

The use of oral immunosuppressants as OLI is an established treatment for various indications, specially, allo-HSCT, SLE and GMN. The creation of multidisciplinary groups to develop protocols for the management of these medications is required.