



# DRUG SAVINGS REALISED BY USE OF A RIGHT CLOSED SYSTEM TRANSFER DEVICE IN THE PREPARATION OF ANTINEOPLASTIC DRUGS

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## Background

Another attempt at cost savings in antineoplastic drugs could be safety cabinet in accordance with aseptic technique procedures.

## Purpose

To determine the rates of drug savings that could be achieved by storing the remaining part of drugs in the vial with and without PhaSeal.

# Material and methods

Drug costs constitute a major part of health expenditure in Turkey. Chemotherapy drug preparations are performed in separated units Among drug classes, antineoplastics are the most expensive. within the hospital pharmacy, inside a class II B2 type biological achieved by preparing the drugs without dose rounding without This study included 16 different glass vials. A 3 month period was compromising either patient or healthcare worker safety. Reducing determined when the devices were not being used (July, August, drug waste could also result in decreased costs for waste. Previous September 2014-period A). Within period A, leftover drugs were studies demonstrated that the PhaSeal Closed System Transfer reused during the day and discarded at the end of the day. Similarly, Device maintains drug sterility for up to 7 days and suggested that a 3 month period was determined when the devices were being used the remaining part of drugs in single use vials could be stored for up (July, August, September 2015-period B). Within period B, to 7 days or during their physicochemical stability period, if shorter. maximum stability period was limited to 7 days. Physicochemical stability information of related drugs was searched for in reference sources.

> For both cases, the amount of saved doses within the 3 month period was proportioned to amount of doses that were supposed to be used in case of instant discard and no drug savings. Cost savings were calculated using price per mg, total amount of prepared doses in mg and proportion of drug saving. The study evaluated only impact on drug savings.



### Results Results are shown in figure 1.

Drug	Proportion (Period A)	Drug Savings (Period A) (mg)	Cost Savings (Period A) (€)	Total Drug Cost (Period A) (€)	Proportion (Period B)	Drug Savings (Period B) (mg)	Cost Savings (Period B) (€)	Total Drug Cost (Period B) (€)
Fluorouracil	7,08%	42500	€ 121,47	€ 1.715,68	3,90%	12000	€ 32,52	€ 833,75
Bevacizumab	5,34%	1800	€ 3.734,59	€ 69.936,21	7,41%	2000	€ 4.148,90	€ 55.990,60
Doxorubicin hydrochloride	1,26%	130	€ 38,25	€ 3.035,33	12,50%	700	€ 122,52	€ 980,18
Docetaxel	1,89%	600	€ 790,74	€ 41.838,20	1,87%	340	€ 448,09	€ 23.961,88
Epirubicin hydrochloride	3,79%	600	€ 237,29	€ 6.260,96	27,67%	2850	€ 726,47	€ 2.625,49
Etoposide	5,12%	900	€ 49,91	€ 974,74	4,41%	300	€ 16,64	€ 377,22
Irinotecan	0,79%	100	€ 39,68	€ 5.022,46	21,96%	2460	€ 1.055,22	€ 4.805,20
Calcium folinate	1,17%	600	€ 21,95	€ 1.875,93	2,20%	1300	€ 47,72	€ 2.169,21
Carboplatin	8,12%	5700	€ 491,30	€ 6.050,53	3,66%	2100	€ 181,01	€ 4.945,53
Oxaliplatin	4,06%	700	€ 352,75	€ 8.688,54	6,85%	850	€ 480,76	€ 7.018,41
Paclitaxel	0,78%	240	€ 129,55	€ 16.608,77	2,89%	750	€ 404,84	€ 14.008,26
Cetuximab	3,09%	300	€ 353,11	€ 11.427,50	5,88%	100	€ 117,70	€ 2.001,76
Cyclophosphamide	5,16%	12000	€ 161,11	€ 3.122,28	11,09%	23500	€ 315,51	€ 2.844,96
Cisplatin	6,25%	600	€ 76,18	€ 1.218,89	3,73%	300	€ 38,09	€ 1.021,19
Cytarabine	17,50%	14000	€ 245,68	€ 1.403,87	53,33%	16000	€ 308,95	€ 579,33
Trastuzumab	10,72%	8250	€ 21.758,53	€ 202.971,38	33,98%	10500	€ 27.692,68	€ 81.496,99
		Total:	€ 28.602,09 7,48%	€ 382.151,26		Total:	€ 36.137,62 17,57%	€ 205.659,95
							0.05	
Total Drug Cost (Period A): € 382.151,26 Cost-Savings (€) (Period A): € 28.602.09 Cost-Savings (€) (Period B): € 36.137.62								
Percentage of Cost sa	7,48%	Percentage of Cost savings (Period B):			17,57%			

# Conclusion

In 11 out of 16 drugs, the rate of drug saving was higher in period B and the percentage of drug savings increased from 7.48% to 17.57% in period B. It was concluded that, in addition reducing exposure to hazardous drugs, PhaSeal could also contribute to drug savings.



#### **Conflict of Interest** No conflict of interest

#### References

1. Dastan I,Cetinkaya V. Comparing Health Systems, Health Expenditures and Health Indicators in OECD Countries and Turkey. Journal of Social Security (SGD), 2015 2. Edward MS, Solimando DA Jr, Grollman FR, Pang JL, Chasick AH, Hightman CM, Johnson AD, Mickens MG, Preston LM. Cost saving realised by use of the PhaSeal(<sup>®</sup>) closed-system transfer device for preperation of antineoplastic agents. J.Oncol Pharm Pract.2013 3. Carey E, Forrey R, Haughs D, Jefferson D, Jorgenson J, McMichael D, Mulvaney J, Spivey S. Second Look at Ultization of a Closed-System Transfer Device (PhaSeal). Am J Pharm Benefits.2011

4. Sanchez et al. CSTDs and microbiological stability of cytostatic. Hosp Pharm Eur. 2013 5. www.stabilis.org