

# HAZARDOUS DRUGS: ANALYSIS OF CONSISTENCY WITH NEW RECOMMENDATIONS

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## Objetive

Determine the degree of implementation of the document recommendations in the Pharmacy Unit of the hospital. In particular quantify the number of drugs whose preparation meet the standards set out in the Technical Note with the intention to improve the adequacy of the Pharmacy Unit protocols.

## Methods or Study Design

The drugs available in the Pharmacy Unit that are included in the Technical Note “Biohazardous drugs” are classified in the three categories specified therein:

1. Biosafety cabinet (BSC) I
2. Biosafety cabinet (BSC)II
3. Reproductive risk (RR) : The preparation in CSB I isn't necessary unless the handler would be in reproductive risky situation.

## Results

- The Pharmacy Unit of the hospital have 121 drugs included in the Pharmacotherapeutic guide of the 213 included in the Technical Note.
- 53/121 (43.8 %) should be handled into BSC II according to the standards. The preparation of 48 (90.6%) hazardous drugs is done in accordance with the recommended prevention measures. Only five drugs (9.4%) (phenytoin, leuporelin, risperidone, tacrolimus, triptorelin) are not handle according to the standards.
- 61 /121 (50.5 %)drugs should be handle into BSC I. No one of these drugs is done in accordance with the recommended prevention measures. 7/121 drugs (5.7 %) with reproductive risk, 5 (71.4 %) are not handled according to the standards (voriconazole, valproic acid, clonazepam, oxytocin and plerixafor).

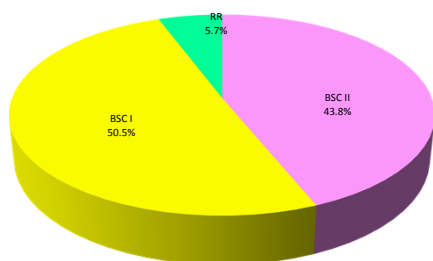


Figure 1: Handling recommendations for biohazardous drugs included in the guide (%)

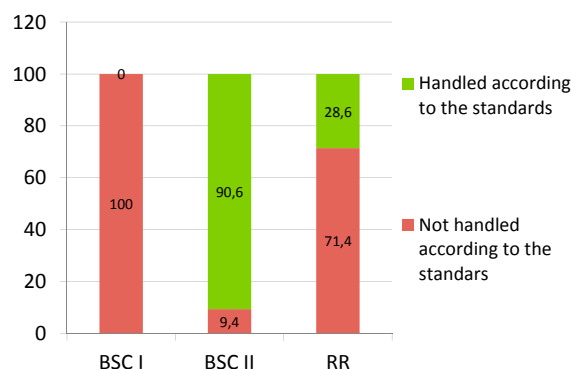


Figure 2: Agreement with the handling recommendations of biohazardous drugs (%)

## Conclusions

At present, 90.6% of biohazardous drugs BSC II, no one of the biohazardous drugs BSC I and 28.6 % with RR are handled according to the standards set in the Technical Note, which leads us to conclude that the implementation of the recommendations in that note is still low in the hospital. Setting up multidisciplinary groups of professionals, including labor unions representatives and experts in occupational health and safety, would be undoubtedly helpful to improve the implementation of these recommendations in the Healthcare System. The resulting increase in the workload of the Pharmacy Units is a fact that must be taken into account by the authorities in each centre.