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CLINICAL AND ECONOMIC OPTIMISATION FOR THE MANAGEMENT OF PATIENT AT RISK OF RESPIRATORY SYNCYTIAL VIRUS INFECTION

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EARLY START 2.0 PROJECT

WHAT WAS DONE?

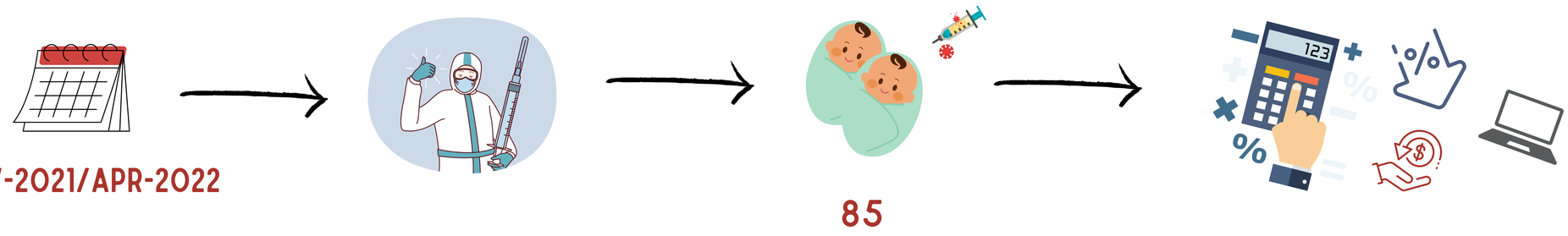
In our Hospital, EARLY START 2.0 project (E.S-2.0) was implemented in collaboration with the neonatal intensive care unit. The E.S-2.0 purpose were increase quality and safety of Pavilizumab galenic preparation to guarantee patient's health and generate an economic saving with an optimisation of hospital resources.

WHY WAS IT DONE?

Until 2020 Pavilizumab, refunded by National Healt System for Respiratory Sincytial Virus (RSV) infection prophylaxis of pediatric patient at risk, was dispensed in 50 mg (FL 50) and/or 100 mg (FL 100) unit packs, regardless of the prescribed dose, with subsequent preparation in the ward and waste of any residual drug. Therefore, project purpose, attued from November-2021, was overcome the past distributive criticalities of Pavilizumab

HOW WAS IT DONE?

E.S.-2.0 involved weekly drug days for the delivery to department staff of personalized galenic preparations of Pavilizumab, prepared by hospital pharmacy service in a contamination-controlled environment.



Through the hospital management system, prescriptions for the period November 2021-April 2022 were extrapolated to verify the validity of the project. There were 85 patients. A Palivizumab consumption database was created to evaluate the mg saved after E.S.-2.0 and the related economic savings.

WHAT HAS BEEN ACHIEVED?

Project implementation allowed to obtain an economic saving of 9.33% related to 2339.01 that would have been dispensed and wasted without E.S-2.0. The results obtained considering the costs of Pavilizumab (FL-50: 10.79 €/mg and FL-100: 8.96 €/mg) and our saving indicators:

- mg saved= mg that would have been delivered before E.S-2.0 – mg after E.S-2.0;
- € saved = (mg residues that would have been dispensed and wasted before E.S-2.0 from FL 100 x 8.96 €/mg) + (mg residues that would have been dispensed and wasted before E.S-2.0 from 50 x 10.79 €/mg).

In addition, the personalized galenic preparations in controlled contamination pharmacy premises guaranteed a sterile pharmacological manipulation process.

EARLY START 2.0 PROJECT'S RESULTS

+2339 mg

+23.121 €

WHAT NEXT?

E.S.-2.0 represents a cost saving policies safeguarding patient security. Practice described is worthy of implementation in hospital realities not just for prophylaxis of RVS infection but also for the management of all patients undergoing treatment with therapies that can be prepared in galenical laboratory.

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