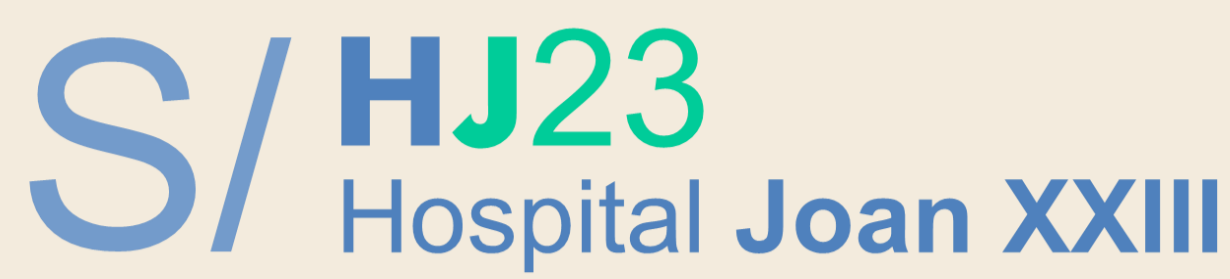


IMPLEMENTATION OF A PATIENT STRATIFICATION MODEL IN OUTPATIENT PHARMACY FOR IMMUNE-MEDIATED DERMATOLOGICAL DISEASES

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L04- IMMUNOSUPPRESSANTS

BACKGROUND

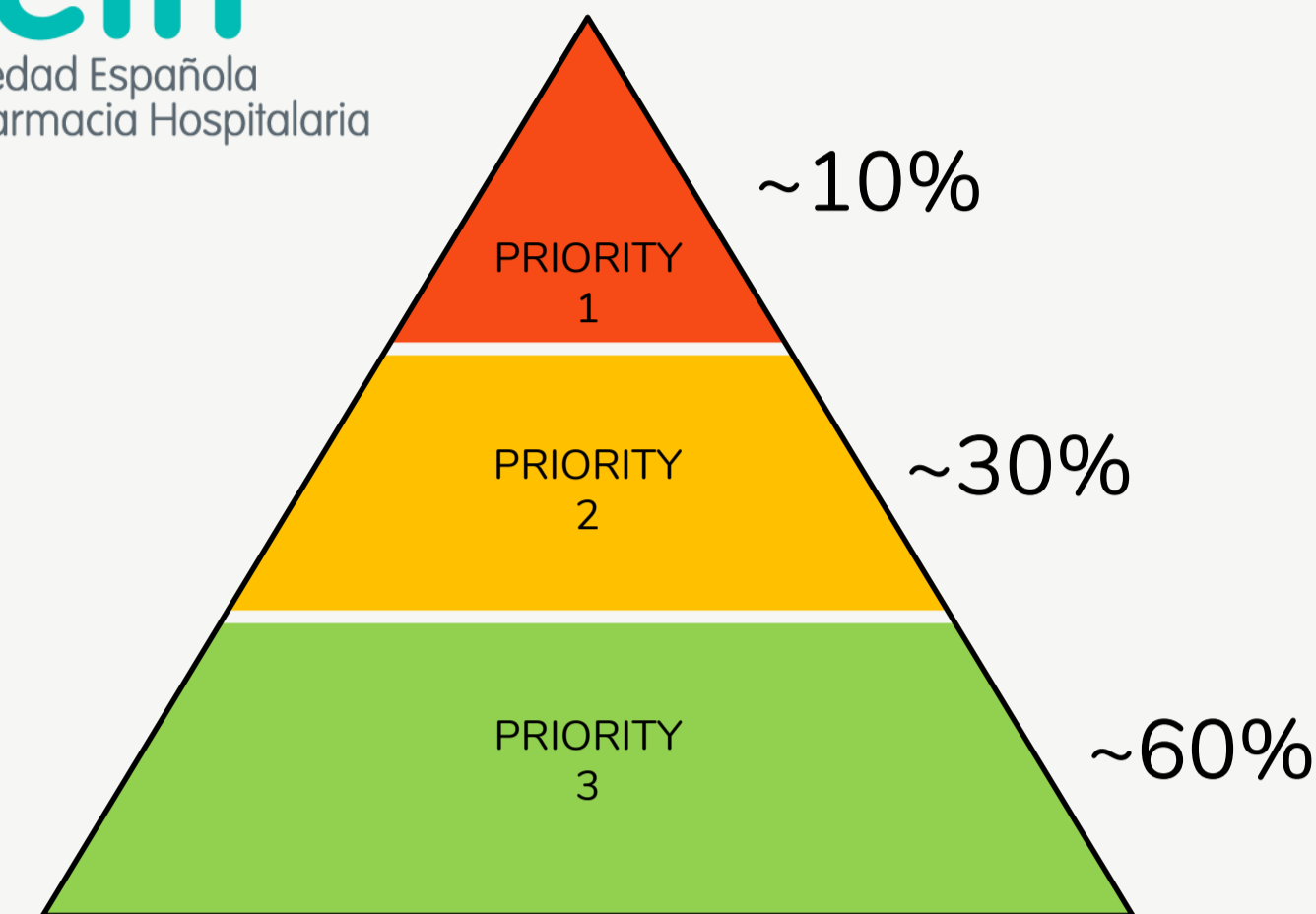
Pharmaceutical Care (PC)



Achieve **safe** pharmacotherapeutic goals
→ Improving **health outcomes**

To determine **patient follow-up frequency** and target those **who benefit most** from Pharmaceutical care:

Capacity
Motivation
Opportunity
Stratification model



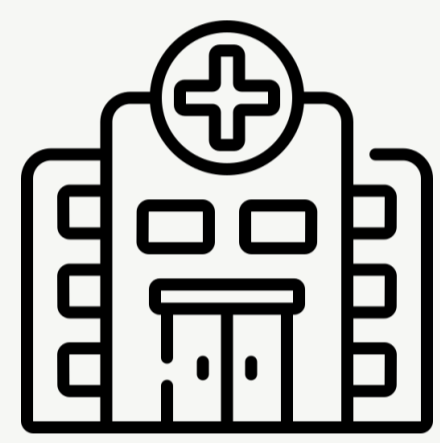
AIM AND OBJECTIVES

To determine the **complexity of patients** with **immunomediated dermatological (IMD) diseases** initiating **biological therapy** in our hospital, using the CMO model, and **compare the results obtained** with the expected model outcomes reported in the bibliography.

MATERIALS AND METHOD

• Cross-sectional study

MAY-SEP
2023



SPANISH
TERTIARY
HOSPITAL



• IMD disease
• Initiating/changing **biological therapy**

WHAT?

To determine the complexity level, the CMO model was applied, encompassing **23 variables** in demographic, socio-sanitary and cognitive, healthcare service utilization, and treatment-related categories. Patient's total score is calculated by combining the points assigned to each variable.

HOW?

Data were collected from **patient medical records**, **electronic prescription dispensing records**, and **clinical interviews** in pharmaceutical care consultations.

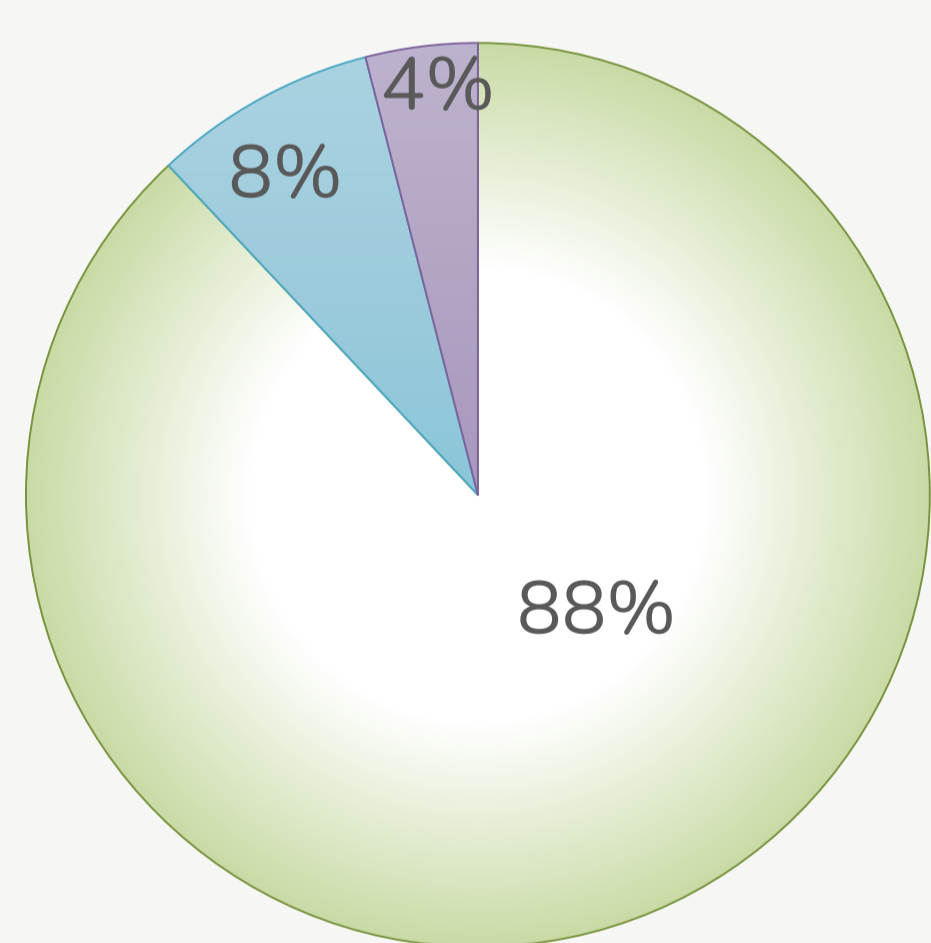
Results were compared with the **percentage distribution proposed** for each complexity level **by the model**.

RESULTS

Demographic variables

52
patients

56% (29) ♂
94% adults



□ Psoriasis
■ Atopic dermatitis
■ Suppurative hidradenitis

Socio-sanitary and cognitive variables



23%



31%

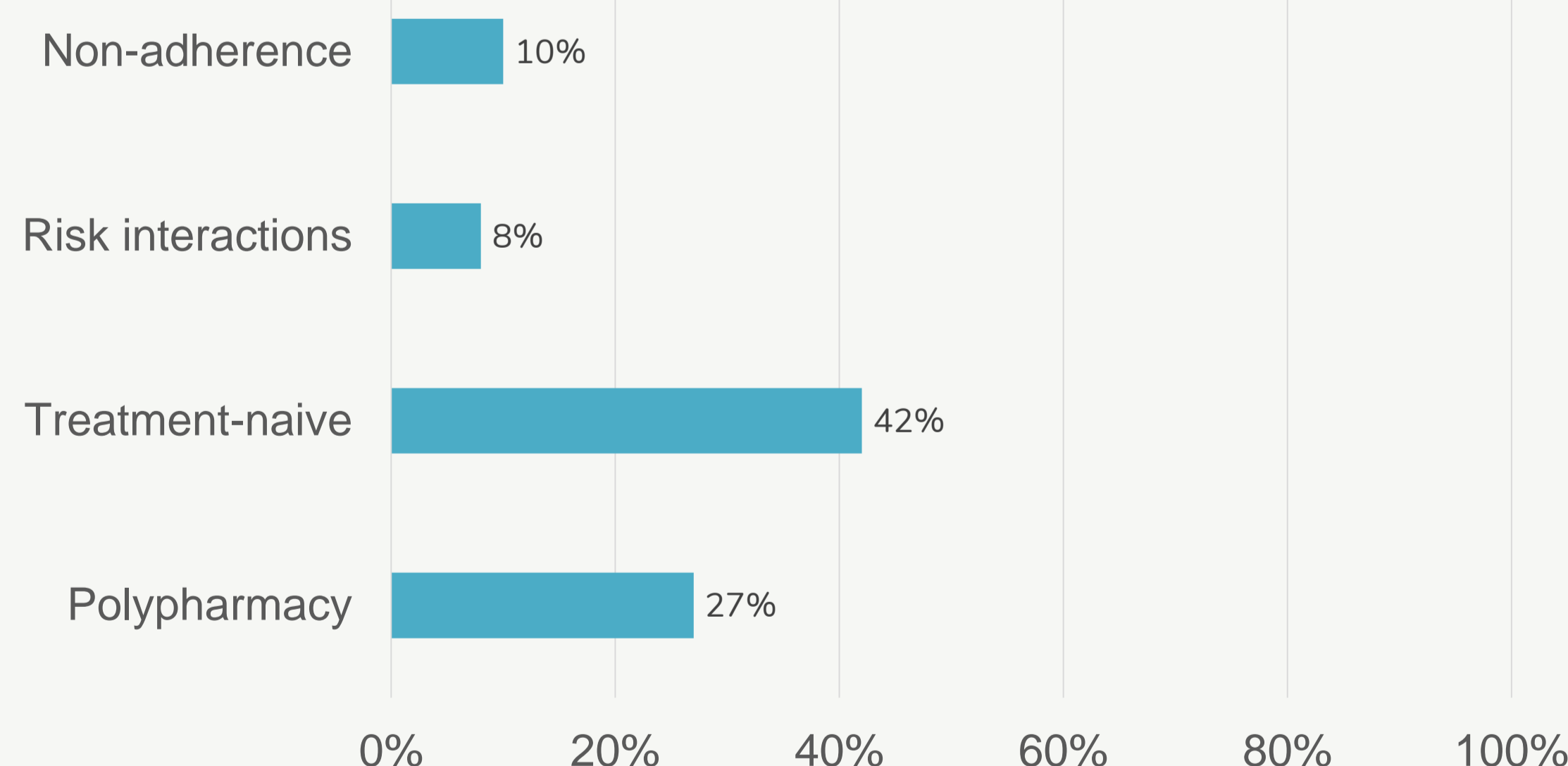


4%



83%

Treatment-related variables

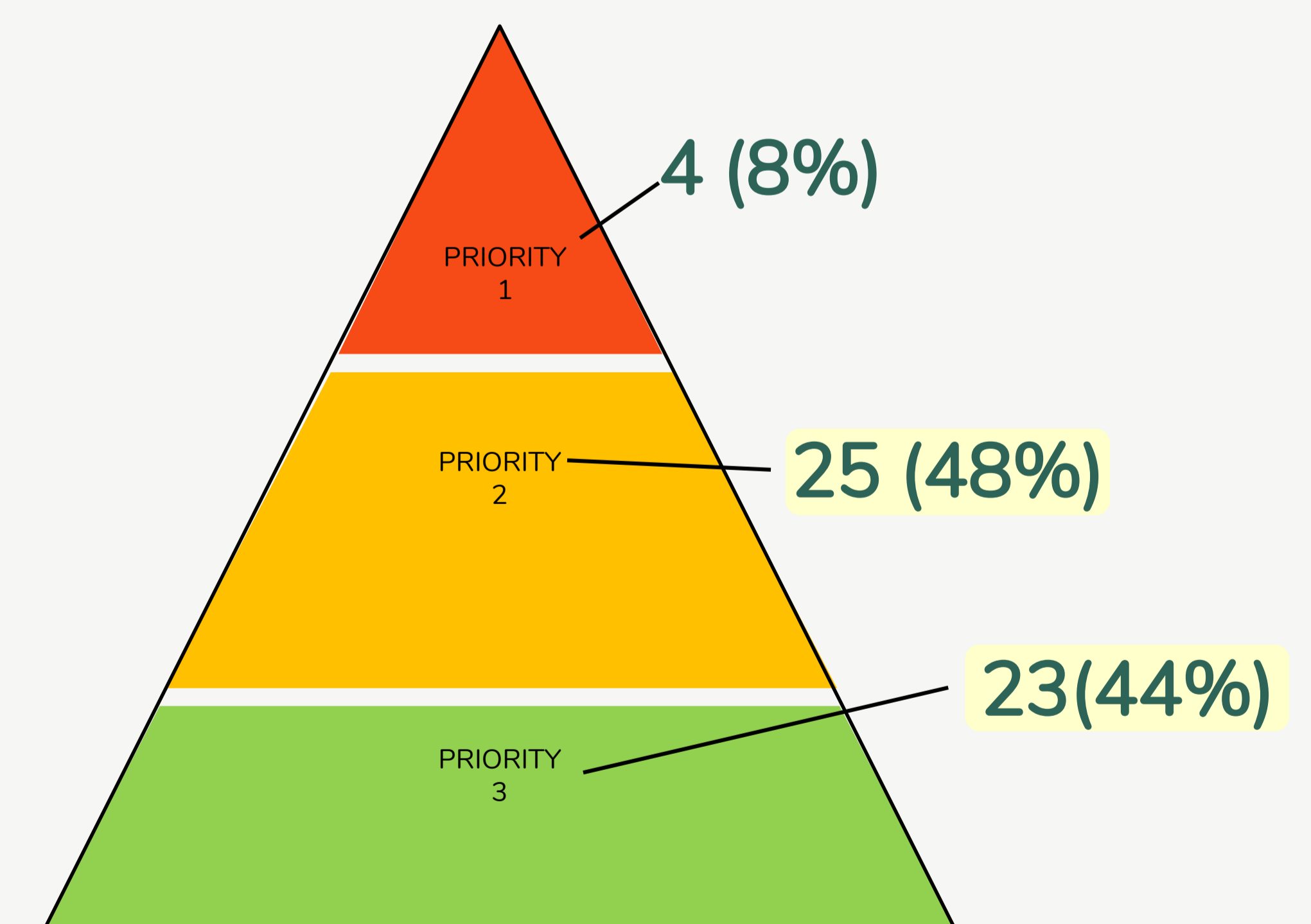


Healthcare service utilization variables

≥ 2 chronic diseases 29%

Moderate/high disease activity 73%

TOTAL CMO SCORE



CONCLUSION AND RELEVANCE

Against expectations from the CMO, **most patients were in level 2**, possibly due to **stratification timing**, occurring during treatment initiation or changes when patients' diseases were most exacerbated.

Through the CMO application, we identified **patients most likely to benefit from PC**, enabling us to reallocate resources for more regular follow-up, ensuring comprehensive patient support.