USE OF A GOVERNMENT DIGITAL TOOL



IN DRUG EVALUATION FOR HOSPITAL PHARMACIES

NOBRE, M.¹; PRATA P. ¹ and RODRIGUES, V.²

Abstract number 11SG - 001

- 1. Pharmacist Hospital Prof. Dr. Fernando Fonseca EPE
- 2. Hospital Pharmacy Director Hospital Prof. Dr. Fernando Fonseca EPE



1. Background and Importance

The Portuguese National Pharmacy and Medicine Institute (INFARMED) implemented in 2015 a Digital Assessment Decision Support Tool (SiNATS) to maximize health gains and sustainability, monitor drug use and its equitable access, based in a pharmacotherapeutic/economic evaluation leading to a Public Financing Report (RAFP) that grants Early Access to Medicines (PAP).

3. Materials and Methods

A 2-years retrospective study was conducted from 2022 to 2023 in an 800-bed hospital. DR's clinical, pharmaceutical and economic data were submitted on SiNATS digital platform to be evaluated by Infarmed (after the approval by the local drug and therapeutic committee), except those Oncology department. The data was analyzed in an Excel 5.0 database.

2. Aim and objectives

To characterize drug requests (DR) evaluated by SiNATS in hospital setting.

4. Results

We enrolled 72 DR, 3 for stock and 69 per patient of which 75% were female with an average age of 51 years, prescribed mainly by Internal Medicine (38%), Pneumology (21%) and Gastroenterology (11%) (upadacitinib and mepolizumab) and RAFP already departments.

The main DR and those with higher approval rate are mentioned on table 1:

				% of
DR	n	%	Clinical Justification	approvals
Nintedan			Inefficacy of	
ib	13	18	corticotherapy	92%
Upadaciti			Failure to first line	
nib	11	16	treatment	55%
Bulevirti			Contra-indication to	
de	6	9	interferon	100%
Mepolizu				
mab	6	9	First-line treatment	40%
Belimum			Failure to first line	
ab	5	7	treatment	40%
Tolvapta				
n	5	7	First-line treatment	100%
mab Belimum ab	5	7	Failure to first line treatment	40%

Overall, approval rate was 75%. Rejections were mainly due to lack of compliance to PAP requirements (61%) namely because of the existence of alternative first line options approved (33%) (belimumab and nintedanib).

The economic impact was 969.652€ per year, of which 667.238€ was related to approvals and 302.614€ to rejections.

5. Conclusions and Relevance

Our data shows a high percentage of approvals. upadacitinib for Crohn disease and mepolizumab for Eosinophilic granulomatosis with polyangiitis showed higher rates of rejection, due to the existence of alternative first line treatments options. Economic impact was high, showing the importance of the definition, by experts in the field, of utilization criteria on a National level, so clinicians and pharmacists, as a team, can optimize treatment outcomes in accordance with RAFP and international guidelines, while ensuring sustainability of public resources and enabling more patients to benefit from innovative therapies.

E-mail adress corresponding author: maria.j.oliveira@ulsasi@min-saude.pt