ANALYSIS OF PHARMACEUTICAL INTERVENTIONS IN A MULTIDISCIPLINARY TELEPHARMACY PROGRAMME

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BACKGROUND

Telepharmacy improves access to treatments for frail patients with mobility limitations.

AIM

To assess pharmaceutical interventions (PI) in a multidisciplinary telepharmacy programme (MTP)



Clinically stable chronic disease on treatment for >3 months, adequate tolerance to medication, adherence >90% and difficulty travelling to hospital

Multidisciplinary programme (MP): hospital pharmacists, nurses, trained pharmacy technicians and nursing technicians

Pharmacists checked the **pharmacotherapeutic context** of this entire population

Patients were contacted by telephone (**pharmacotherapeutic interview**) one week before the drugs were sent to primary care centers every 2-3 months.

Applications: Farmatools® application and clinical history were used to obtain data for analysis

Recorded data: patients in MTP, distribution of PI in patients, therapies, prescribing medical departments and types of PI



- Total Patients: 516
- **Drug distribution:** adalimumab 40 mg (N = 41; 16.6%), etanercept 50 mg (N = 29; 11.7%), tofacitinib 5 mg (N = 16; 6.5%), secukinumab 300 mg (N = 10; 4%) and dimethylfumarate 240 mg (N = 7; 2.8%)
- Medical departments with the most PI: Internal Medicine (N = 88; 35.6%), Dermatology (N = 46;18.6%), Pneumology (N = 29; 11.7%), Neurology (N = 22; 8.9%) and Infectious Diseases (N = 15; 6.1%).

Pharmaceutical interventions

Total PI: 247 Patients with PI: 157 Types of PI:

- I. Close pharmacotherapeutic follow-up due to lack of medical follow-up (N = 94; 38.1%)
- II. Monitoring or information on treatment adherence (N = 51; 20.6%)
- III. Closer monitoring due to risk of inadequate therapy effectiveness (N = 29; 11.7%)
- IV. Reporting adverse event information (N = 24; 9.7%)
- V. Review and information on drug interactions (N = 17; 6.9%)
- VI. Information on drug administration (N = 12;4.9%)
- VII. Others (N = 20; 8.1%)

CONCLUSION

Numerous PI were developed in MTP. Adalimumab 40 mg and etanercept 50 mg were the most frequently intervened therapies. The medical departments most frequently involved were Internal Medicine and Dermatology. The most common PI were close pharmacotherapeutic follow-up due to lack of medical follow-up and monitoring/provision of information on treatment adherence. Some PI addressed ineffectiveness, adverse events, interactions and drug administration.

