

# INTERVENTION OF THE HOSPITAL PHARMACIST TO VERIFY AND PROMOTE THE APPROPRIATENESS OF HUMAN ALBUMIN PRESCRIPTION IN AN ITALIAN HOSPITAL



Martignoni I, Morati S, Grotto A, Filosofo M, Gambera M (Italy)



PEDERZOLI

## BACKGROUND & IMPORTANCE

It is generally acknowledged that the albumin, as a medication, is overused. As it is also a limited resource, the role of the pharmacist is crucial to guarantee the appropriateness of the prescription and to prevent the use outside the indications approved by AIFA.

## AIM & OBJECTIVES

The aim of the project was to promote the correct use of albumin administered to patients admitted to an Italian hospital and to verify the clinical effectiveness of its administration for therapeutic purposes. The aim should have been reached by the intervention of the hospital pharmacist who evaluated every single hospital department request form of albumin and, in case of doubt, called by phone clinicians.

## MATERIALS & METHODS

The pharmacist's intervention took place between 1 July 2022 and 1 July 2023. Once the albumina request form had been validated by the pharmacist, the vials were delivered and registered in the warehouse application and the excel sheet was updated with the patient's blood values before and after albumin administration. The final step was to analyze the trends of patients' blood albumin parameters.

## RESULTS

373 albumin request forms with 20 different indications were received by the hospital pharmacy. In particular 78 for "major surgery", 65 for "large volume paracentesis", 43 for "protein dispersing enteropathies", 79 for "other". Extrapolation of consumption showed that, following the pharmacist's intervention, the use of albumin decreased to 3928 vials delivered compared to the same period in the previous year (1 July 2021 - 1 July 2022) when 14517 vials were delivered. From an economic perspective: the expense of albumina was as follows: €284.553 in 2021-22 and €76.998 in 2022-23. The evaluation of the trend of the blood values after albumina administration showed that, if the treatment was appropriate, patients achieved positive results with a return to albumin values of 2,5 g/dl.

## CONCLUSION & RELEVANCE

Our results show that a dialogue between hospital pharmacists and physicians, and a high focus on the use of albumin, can lead to more appropriate and effective use of albumin and significant cost savings. We would try the same approach to the use of immunoglobulines, blood derivatives with the same concerns (iperutilization, limited resource, high cost) of albumin.



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isabella.martignoni@ospedalepederzoli.it