There was no difference between the number of patients with a one or a two-piece appliance. Closed appliances are most commonly used; 75% of patients had experienced at least one appliance leakage/year; 57.15% needed adhesive paste, 36% a skin protection barrier. Only 10% had difficulty in removing the stoma appliance causing skin stripping and ulceration.

Conclusions In the Patti HD hospital pharmacists can play a role in supporting and guiding patients and their carers by providing information, education and counselling on how to best manage their stoma in daily activities, in order to achieve an acceptable quality of life.

No conflict of interest.

OHP-070 SATISFACTION WITH ELECTRONIC PRESCRIBING IN A GENERAL HOSPITAL

doi:10.1136/ejhp-2013-000276.443

¹T Sánchez Casanueva, ²P López Sánchez, ²E Jerez Fernández, ¹JJ Márquez Nieves, ²M Heredia Benito. ¹Complejo Hospitalario La Mancha Centro, Pharmacy, Tomelloso, Spain; ²Complejo Hospitalario La Mancha Centro, Pharmacy, Alcázar de San Juan, Spain

Background Electronic prescribing (EP) is a useful tool for improving the safety and adaptability of the prescription process. Surveys enable us to find out the satisfaction of users and potential areas for improvement.

Purpose To find out how satisfied doctors and nurses of the Internal Medicine Service (IMS) were with EP.

Materials and Methods In 2010 the 'Mambrino XXI' electronic medical record, which is an EP module, was implemented in a 100-bed general hospital.

In 2012 the Pharmacy Service developed an anonymous and confidential survey that was given to the doctors and nurses of the ISM. The questionnaire included 6 questions rated with a Likert scale (1: very bad/strongly disagree, 2: bad/disagree, 3: Regular/indifferent; 4: good/agree, 5: very good/strongly agree): 1. How do you consider the ease of use? 2. How does the speed of the application seem to you? 3. Are the alerts for allergies and duplications useful? 4. Do you think it prevents medication errors and improves safety? 5. Is the design of printed orders satisfactory? 6. What do you think about the support from the Pharmacy Service?

An overall satisfaction question was also included with 4 answers: very satisfied, satisfied, dissatisfied, very dissatisfied.

Results 6 doctors and 10 nurses completed the questionnaire. The average score was 3.7 for question 1; 2.9 for question 2; 3.9 for question 3; 3 for question 4; 3.1 for question 5 and 4.1 for question 6; 6 respondents were very satisfied, 5 satisfied and 5 dissatisfied.

Conclusions The survey evaluated aspects of practise use, safety and Pharmacy Service support. More than two-thirds of doctors and nurses of the ISM were satisfied with the EP. There are opportunities for improve all the aspects investigated, especially the programme speed, the perceived safety and the design of printed medical orders.

No conflict of interest.

OHP-071 STUDY OF GLUTAMINE USE IN ADULT PARENTERAL NUTRITION

doi:10.1136/ejhp-2013-000276.444

R Tamayo Bermejo, C Gallego Fernández, J González Chávez, M Ruiz de Villegas, I Muñoz Castillo. HRU CARLOS HAYA, Servicio de Farmacia, Málaga, Spain

Background Intravenous glutamine supplementation in patients with catabolic stress is widespread in clinical practise, although there is no clear consensus on its use.

Purpose To study the use of glutamine in adult parenteral nutrition to adapt it to the available scientific evidence and to assess the economic impact of parenteral nutritional treatment.

Materials and Methods Retrospective observational study of units of parenteral nutrition (PNU) produced during 2011.

We studied the three services that used PN most: Digestive Surgery, Digestive and Intensive Care Unit (ICU).

Data collection source: Software in parenteral nutrition area. Pharmacy Management System.

Study Variables:

Protocols produced by service (number of each PNU protocol, protocol type, number of patients with each protocol and duration of nutrition).

Individualized PNUs produced by service (number of PNUs, number of patients and duration of PN).

Cost of each protocol and glutamine cost therein.

Results Of all adult PNUs produced in accordance with a protocol, 58% were stress protocols.

PNU per service (including individual):

Digestive Surgery: 80% of the total number of PNUs were stress PNU and corresponded to 68% of the patients. There is scientific evidence to recommend the use of glutamine in patients undergoing major abdominal surgery.

Digestive: 52% of the total number of PNUs were stress PNU and corresponded to 54% of the patients. Glutamine use was associated with acute pancreatitis and inflammatory disease, although clinical studies are insufficient to recommend this.

ICU: 63% of the total number of PNUs were stress PNU and corresponded to 72% of patients. There is evidence of clinical benefit with high recommendation.

Glutamine cost varies between 45.4%–55.7% of the total cost per PNU.

76.5% of the total cost of protocolized PNUs corresponded to stress protocols.

Conclusions An opportunity for improvement is identified in the use of glutamine. We propose a detailed study of the prescription/indication to rationalise its high use and associated costs.

No conflict of interest.

OHP-072 STUDY OF USE OF COLISTIN IN A SERBIAN CLINICAL CENTRE

doi:10.1136/ejhp-2013-000276.445

M Grcic, M Tomic. Clinical Center Serbia, Service for the Pharmaceutical Business and Supply, Belgrade, Serbia

Background Colistin (polymyxin E) is a mixture of cyclic polypeptides colistin A and B and it remains one of the last-resort antibiotics for multidrug resistant species of *Pseudomonas* and *Acinetobacter*. The increased use of Colistin was noticed at the end of 2011.

Purpose To analyse the use of Colistin due to increased bacterial resistance and difficulties in supply, as no licence has been issued for marketing authorization of this medicine in Serbia.

Materials and Methods A retrospective descriptive study of patients who started Colistin treatment from January to September 2012. We reviewed those forms that recorded: patient demographic data, posology, duration, kind of treatment and type of infection. All data were collected in an Excel database.

Results In this period, 86 patients were prescribed Colistin (55% men). In 74% cases the posology was 1M IU/8h, and in 26% was 2M IU/8h; mean duration of treatment was 18.07 days, but in 38% patients we did not get data about duration of treatment. Colistin