

from their design to their use, passing through their manufacturing and marketing. For implantable medical device (IMD's), risks are greater, and a quality management system based on rigorous traceability is essential to their management to ensure their quality and the safety of implanted patients.

**Purpose** To assess overall conformity of the IMD's traceability process in the operating rooms as part of quality and risk management at our hospital.

**Material and methods** This was a prospective study of the IMD's traceability process conformity for all patients admitted for a surgical procedure using IMD's in gynaecology, urology, thoracic surgery and visceral surgery, over a period of 6 months.

Information was extracted from the individual IMD's traceability records and from the IMD's traceability register.

**Results** During the study period, 365 IMD's were implanted in 297 patients. The most used IMD's were parietal reinforcement plates (50%) and implantable staples (28%). The most IMD's consuming services were visceral surgery (73%) and urology (18%). Traceability anomalies (lack of information about patients and/or IMD's) were present in 22% of cases, and the service responsible for the majority of discrepancies was the urology service (58%). A total lack of traceability was noted in less than 1% of cases.

**Conclusion** The traceability procedure remains imperfectly applied, in particular concerning the completeness of recorded information. Efforts must be pursued in terms of observance of this procedure, and continuously evaluated to improve the quality, and to master the risk level, at our establishment.

#### REFERENCES AND/OR ACKNOWLEDGEMENTS

None.

No conflict of interest.

#### 5PSQ-126 MEDICATIONS AND FALLS IN THE ELDERLY: AN EPIDEMIOLOGICAL STUDY IN A FRENCH HOSPITAL

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10.1136/ejhp-pharm-2019-eahpconf.559

**Background** Falls in the elderly is a major public health problem. One-third of people over 65 fall at least once a year. Polypharmacy, which is defined as taking more than four drugs a day, is a major risk factor for falls in the elderly.

**Purpose** The aim of this study was to determine the frequency of use of drugs that increase the risk of falls and the impact of changes in these treatments in the occurrence of falls in the hospital.

**Material and methods** This study was a retrospective chart review of patients who sustained falls in the hospital. The list of fallers was obtained from the fall reporting data. In the first part, the clinical characteristics of patients and environmental falls were analysed.

In the second part, the pharmaceutical data of patients with a recent modification of their treatments were sought (number of medications per day, hypotensive and inducing drowsiness treatments and type of recent modifications of these treatments).

**Results** Seventy-three per cent of patients were falling in their rooms. Patients during the fall were mostly calm and wandering. In the majority of cases, the falls were of no clinical consequence (69%).

#### 5PSQ-125 QUALITY AND RISK MANAGEMENT IN HOSPITALS: EVALUATION OF IMPLANTABLE MEDICAL DEVICES' TRACEABILITY PROCESS

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10.1136/ejhp-pharm-2019-eahpconf.558

**Background** Medical devices may be at the origin of incidents or risks of incidents due to several deficiencies in their circuit,