**5PSQ-147 | THE VALSARTAN SAGA: PHARMACISTS’ COMPETENCE TO RESOLVE THE THERAPEUTIC CHALLENGE**

1C Muscat*, 1A Attard, 3A Seracino Inglofs, 2University of Malta, Faculty of Medicine and Surgery - Department of Pharmacy, Msida, Malta; 3Malta, Medicines Authority, San Guarn, Malta

Background A safety alert by the European Medicines Agency notified that some valsartan products were contaminated with the genotoxic impurity, N-nitrosodimethylamine (NDMA). This triggered a voluntary recall of potentially impacted valsartan medicines.

**Purpose** To investigate the competence of the pharmacist in assessing and addressing the risk-benefit associated with the safety concern of NDMA in valsartan medicines.

**Material and methods** A symposium was organised to evaluate the competence of the pharmacists in the application of scientific knowledge to the therapeutic challenges in the valsartan saga. A 32-slide presentation and nine questions were prepared and presented to the pharmacists (n=26, 16 females, 10 males; age 22 to 45; 10 hospital, 12 community, four industrial pharmacists) The responses given in the interactive discussion were recorded interactively by the Mentimeter and the results were related to the competence through an arbitrary evaluation.

**Results** Eighteen pharmacists (68%) stated that NDMA is a probable human carcinogen found to cause cancer in animals. Twenty-two (84%) stated that not all sartans contain a tetracose ring and 20 (77%) responded that the formation of NDMA occurred during the synthesis of valsartan. Twenty (77%) stated that NDMA is unlikely to bioaccumulate and seven (27%) stated that the half-life of valsartan is 6 hours. Six pharmacists (24%) correctly stated that 1.5 mcg/day was the tolerated limit for daily exposure to NDMA and 24 (88%) stated that drinking water, ham, bacon and cigarettes were contaminated with NDMA. Twenty (77%) pharmacists advised that valsartan should not be stopped abruptly until alternative treatment was available and 24 (92%) stated that they would recommend switching patients to another sartan as early as possible.

**Conclusion** The findings show that pharmacists have the necessary competence to deal with the valsartan saga. However, the symposium shows that pharmacists can benefit from an added value to their scientific knowledge such as in the pharmacokinetics and the clinical relevance of angiotensin-receptor antagonists and the threshold for toxicological concern of NDMA impurities.

**REFERENCES AND/OR ACKNOWLEDGEMENTS**


No conflict of interest.

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**5PSQ-149 | SELF-MEDICATION IN CANCER PATIENTS: SURVEY CONDUCTED IN THE PHARMACY DEPARTMENT OF A UNIVERSITY HOSPITAL**

N Nchined*, K Lecheb, Z Fachhab, Y Tadlaoui, S Makram, Y Bousliman, J Lamsaouri. Mohammed V Military Training Hospital, Pharmacy, Rabat, Morocco

Background At our university hospital, the number of cancer patients treated by injectable chemotherapeutic drugs is increasing. Currently, patients need to be increasingly integrated in their own care and participate in the reporting of adverse reactions. Admittedly, under-reporting of adverse reactions related to medical devices remains a major barrier to evaluate matrievigilance in our institution. As a result, it seems important to regularly provide patients with information on their medical devices used for the administration of injectable chemotherapeutics (MD-Chemo).

**Purpose** To evaluate the interest in informing patients about MD-Chemo by means of a knowledge assessment questionnaire, and to explain how this can help to promote spontaneous reporting on matrievigilance by cancer patients.

**Material and methods** This is an observational study of 2 months, carried out at the Functional Unit of Management of Products with Particular Status (UFGPS) of our pharmacy department during dispensing of chemotherapeutic drugs to cancer patients by means a questionnaire including nine topics.

**Results** We were able to carry out 111 interviews wherein interviewed patients showed a low level of knowledge on most of the items discussed. Seven patients did not know the medical devices they were using, and 84 had implantable ports. Among MD-Chemo carriers, 106 patients (95.5%) wished to benefit from additional information concerning their route of administration. Sixty-three patients did not know if there were precautions to take with their medical device, while 105 (94.7%) did not know the signs of a device-related infection. Adverse medical devices’ reactions reports issued by cancer patients were non-existent. This situation made it possible to target the missing information that led to the under-reporting.

**Conclusion** Currently, a series of participatory pharmaceutical interventions are conducted to ensure the best sharing information necessary to ensure compliance and, above all, a good quality of life. In addition, recent integration of adverse reaction reporting into the day-to-day activities of UFGPS pharmacists, is a good way to increase the number of submitted reports.

**REFERENCES AND/OR ACKNOWLEDGEMENTS**

No conflict of interest.

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**5PSQ-148 | PHARMACOVIGILANCE AND CLINICAL PHARMACY APPLIED TO MEDICAL DEVICES: SHOULD CANCER PATIENTS BE INFORMED ABOUT THEIR MEDICAL DEVICES?**

N Nchined*, M El Marrak, B El Ouadghi, Y Tadlaoui, Y Bousliman, J Lamsaouri, S Makram. Mohammed V Military Training Hospital, Pharmacy, Rabat, Morocco

Background The use of self-medication in cancer patients in combination with conventional treatments has increased in recent years. Easy access to information makes it a common practice. In our country, cancer is the second leading cause of death after cardiovascular diseases. In this context, self-medication is a poorly documented practice. It is not without potential consequences.

**Purpose** To have a preliminary idea of the prevalence of self-medication in our cancer patients undergoing treatment.

**Material and methods** This was an observational prospective study conducted in December 2017 at the Functional Unit for Management of Products with Special Status (UFGPS) of our