

Background Educational programmes for hospital pharmacists in our country are not focused on research activities related to original or unoriginal data analysis. All necessary competencies are rarely part of the educational training for hospital pharmacy students, and during the post-graduate school of hospital pharmacy.¹ Scientific societies should fill these scientific gaps and should give the opportunity to achieve all necessary research skills and competencies.

Purpose The main purpose of the project carried out by the Italian Society for Clinical Pharmacy and Therapeutics (SIFaCT) was to introduce some young hospital pharmacists to meta-analysis, trial-sequential analysis and Bayesian meta-analysis, and support them in publishing original research.

Material and methods SIFaCT scheduled 5 days of educational training to introduce young hospital pharmacists to specific data analysis skills. The society provided on the first day a lecture by an internationally-acknowledged leader, followed by a total of four educational days of teamwork activities and data analysis simulations.

For each group of three to four pharmacists, a scientific project was assigned, and each procedural step of data analysis was shared with all the young pharmacists. Participants had deadlines to perform in the following activities: literature review and data collection, data analysis, interpretation of results, choice of journal and type of article, paper drafting and submission.

Results Fifteen young hospital pharmacists were selected to be part of the project as participants. They covered the following therapeutic areas: clinical oncology and haematology, diabetes, supplementary dietary intakes in chronic diseases, ancillary therapy and ophthalmology. A month after the end of the project, two papers had been accepted by two different PubMed-indexed scientific journals, while the other three papers were almost ready to be submitted.

Conclusion Hospital pharmacists should be more confident with several methodological instruments. There is a lack of education in this field, both from the university programmes and scientific societies. We encouraged 15 young professionals to focus their activities on research, with the purpose of supporting them in a new increased professional awareness. Scientific societies should spend more time, money and energy in improving pharmacists' skills necessary for a higher scientific production.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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6ER-020

SOCIAL AUTHORITIES CONCERNING #HOSPITALPHARMACY ON TWITTER

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Background Twitter has become a useful digital tool for the hospital pharmacy (HP) community.

Social Authority Score (SAS) is a Twitter influence scale (1–100) that considers key performance indicators such as number of followers, user mentions, number of retweets and engagement of the user publications on Twitter¹.

Purpose The main aim was to create a Twitter list including the most influential HP profiles, according to the SAS.

The secondary objective was to analyse the characteristics of the included profiles.

Material and methods Twitter users' biographies were examined with the web-based tool FollowerWonk (<https://moz.com/followerwonk>) using the keywords 'Hospital Pharmacy', 'Farmacia Hospitalaria', '#HospitalPharmacy', '#FarmaciaHospitalaria', 'Hospital Pharmacist', 'Farmacéutico Hospitalario', 'Farmacéutica Hospitalaria', 'Farmacéutico de Hospital', 'Farmacéutica de Hospital' and 'Farmacia de Hospital'.

All profile data, including SAS, was exported to a database sheet where descriptive statistical analysis was performed.

Only the profiles with a SAS \geq 50 were included in the final analysis.

The exclusion criteria were:

- Non-hospital pharmacist profiles.
- Non-Spanish or English accounts.
- Inactive user (no tweets posted in the past 3 months).
- Non-European user location.
- Restricted profiles.
- Profiles without pictures.

Results One-thousand eight hundred and eighty-three Twitter profiles were obtained after the initial search. After applying inclusion criteria and erasing duplicate records, only 70 profiles met all criteria.

The list has been published as 'Hospital Pharmacy' on <https://twitter.com/Amonterodel/lists/hospital-pharmacy>.

Most of the profiles were males (30 versus 28 females) and 12 were ungendered profiles.

86% of the profiles were Spanish.

The mean SAS was 55.2 (SD 4.28), with a maximum score of 66.8.

The mean number of followers was 1826 (225–10,670) and the mean number of published tweets was 7506 (764–37,388). An average of 3.3 tweets a day (0.7–15) were posted by the selected profiles.

Conclusion This list may help to identify HP 'influencers' for new HP Twitter users, to follow trending topics related to HP and to facilitate joining in with the discussions.

Social authorities on HP are mostly Spanish profiles with a publication rate >3 tweets/day and more than 1500 followers.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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6ER-021

WHY SUCH A LOW PARTICIPATION OF PHARMACISTS IN THE PATIENT EDUCATION PROGRAMMES IN OUR HOSPITAL?

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Background Multidisciplinary is a key concept in patient education. A multidisciplinary approach is recommended by

national health authorities and several laws govern this notion since the beginning of the 2000s. In our hospital, 34 patient education programmes exist but only five integrate a pharmacist into their team.

Purpose The main objective of this qualitative research is to understand why pharmacists are so few in patient education teams by studying the perception of other health professionals on the work of pharmacists. Then, we could propose several solutions to make easier the integration of pharmacists into these multidisciplinary healthcare teams.

Material and methods Semi-structured interviews were planned with the healthcare professionals involved in the educational teams where there are no pharmacists. After a word-by-word anonymous transcription, verbatims were coded in the software Nvivo 12 (QSR International; Melbourne, Australia) by two pharmacists trained in qualitative research in order to minimise the subjectivity of this work.

Results Fourteen healthcare professionals had been interviewed: six nurses (among whom three executive nurses), four physicians, two psychologists, one dentist and one clinical research associate. These persons represented 11 of the 34 educational programmes. The results showed that the pharmacist was not considered as a part of the healthcare team. Moreover, the pharmacy profession was not well known by others healthcare professionals, which was why patient education was not known as a pharmaceutical mission. The added-value of the pharmacist was contentious (pharmaceutical expertise was recognized but pharmacists had a lack of knowledge of the real-life experience of the disease according to the interviewed). Respondents also mentioned organisational factors such as lack of time and funds.

Conclusion All these elements of the response could be used in the aim to make it easier for pharmacists' integration into the educational teams and enhance their multidisciplinary nature. This work allowed reflection with the educational teams, which is essential to the integration. In the team interviewed, there is still no clinical pharmacist and we hope that development of clinical pharmacy could change these representations. Furthermore, it would be interesting to compare our results with the perceptions of European or international health professionals on the role of pharmacists in educational teams.

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6ER-022 WHAT IS PHARMACOVIGILANCE FOR YOU? A SURVEY OF 153 PHARMACISTS

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Background Our national pharmacovigilance system is based on the spontaneous reporting of adverse drug reactions (ADRs) which requires successful participation of health professionals and pharmacists, in particular their specialisation in medicines and their proximity and availability for the patient.

Purpose To study the knowledge, and the perception of the pharmacists of the largest city of our country in terms of pharmacovigilance.

Material and methods This was a descriptive study conducted in the form of a survey of pharmacists practising in 153 pharmacies in the economic capital of the country, chosen at random, through an anonymous self-administered questionnaire of 19 questions organised around three items, over a period of 4 months from September to December 2017.

Results One-hundred and thirty pharmacists (85%) responded, of whom 40% had experience of less than 10 years. Regarding their pharmacovigilance knowledge, n=108 (83.1%) confirmed that they were aware of the existence of a national pharmacovigilance organisation in our country. Among pharmacists surveyed, 1.7% could not give a definition of pharmacovigilance, while 67.8% defined it as the activity of identifying, assessing and preventing ADRs resulting from the use of drugs. As for their opinion on the ADRs to be reported, the exceptional or unexpected ADRs were the most chosen by respondents with 25.9%. Sixty-four per cent of pharmacists confirmed that they had already been asked about ADRs in patients. But only 10.7% of these reports were sent to competent authorities. Among the proposed answers concerning the under-reporting, the ignorance of the reporting circuit remains the most chosen cause, with a rate of 44.2%. Finally, a more simplified statement was the way to improve the number of statements most cited, with a rate of 32.7%. The other means proposed, with a rate of 1.2%, were continuing education and awareness-raising through the media.

Conclusion This study showed a moderate level of knowledge and a low perception of pharmacovigilance. There is therefore a real interest in sensitising the teams of pharmacists so that they can play their role in the spontaneous reporting of adverse effects. In this context, a national pharmacovigilance awareness day is planned for March 2019.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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6ER-023 ESTABLISHMENT OF GROUP WORK: WHAT IS THE EFFECT ON THE STATE OF KNOWLEDGE AND PERCEPTION OF PHARMACOVIGILANCE AMONG OUR FUTURE MOROCCAN PHARMACISTS?

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Background For pharmacy students, the time devoted to the 'adverse effects and pharmacovigilance' module was 2 hours in the first year. A first assessment of knowledge showed a low level of knowledge concerning adverse effects and pharmacovigilance, following which tutorials have been added to the training programme.

Purpose To evaluate the state of progress of knowledge and perception of students in the second year of pharmacy education with regard to adverse drug reaction (ADR) and pharmacovigilance, after the introduction of a work groups system.

Material and methods This was a monocentric descriptive study conducted in the pharmacology laboratory of the Faculty of Medicine and Pharmacy of Mohammed V University of Rabat, for all students of the second year of pharmacy for the academic year 2017–2018, by means of a questionnaire of the knowledge and perception of pharmacovigilance