

Conclusion SI makes it difficult to manage medicines at the pharmacy service and consumes a significant amount of resources so that they do not affect the patient. Shortages usually increase treatment costs. Considering that most of the supply problems are essential drugs, these problems can compromise the quality of healthcare and patient safety.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Agencia Española de Medicamentos y Productos Sanitarios, Centro de Información de Medicamentos (CIMA) Disponible en: <https://cima.aemps.es/cima/publico/home.html>

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2SPD-034 DRUG SHORTAGES. ANALYSIS OF THE ECONOMIC IMPACT

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Background Problems caused by medicines shortages are serious, threaten patient care in hospitals and require urgent action.

Purpose To evaluate the economic impact of drugs' shortages and analyse the consequences that it entailed in hospital pharmacy services.

Material and methods A retrospective observational study was performed. Medication requests were reviewed through the application of management of medicines in special situations (AGMSE) of the Spanish Medicines Agency (AEMPs) in the past 2 years (from July 2016 to July 2018) in two regional hospitals.

All purchases made by the pharmacy services during that period were reviewed. Those cases in which the purchase was made through the AGMSE of the AEMPs were studied due to a lack of supply by pharmaceutical laboratories. The economic impact of the supplier change was analysed because it could not be purchased from the national supplier. The purchasing management software (SAP) was used in order to calculate economic data.

Results A total of 447 requests were detected through the AGMSE of the AEMPs in the established period: 129 requests (28.85%) were drug-shortage problems which affected a total of 19 different active substances.

Most of the affected drugs (78.94%) were for intravenous administration.

The price of the national drug invoiced during the study period was compared with the price billed through the AGMSE of the AEMPs. This fact meant an increase of € 48,931.32 in comparison with the theoretical amount (€ 22,953.89). It showed an increase of 213.17% compared to the cost if these stock breakages had not occurred.

Conclusion During the study period, the shortage of medicines involved an increase of 213% in the cost of medicines, concerning numerous drugs, especially those for intravenous administration.

When a lack of supply occurs, small hospitals are affected early, consuming economic resources and increasing the work of health professionals.

REFERENCE AND/OR ACKNOWLEDGEMENTS

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2SPD-035 MEDICINE SHORTAGES: IMPACT ON A THIRD-LEVEL HOSPITAL PHARMACY DEPARTMENT ACTIVITY

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Background Medicine shortages (MS) have become a global concern. It is a real challenge for hospital pharmacists who have to search for possible solutions in order to minimise their impact on patient's health.

Purpose The aim of this study was to assess the MS and to evaluate their effect on a third-level hospital pharmacy (HP) department's day-to-day activity.

Material and methods A retrospective descriptive study was carried out between July 2017 and June 2018. Data were obtained from internal MS data logs and MS notification registers from health authorities (HA). Data collected included: active substance, dosage form, manufacturer, pharmaceutical intervention, if the medicine shortage was informed by HA and if it changed the medicine distribution circuit (from community pharmacy (CP) to HP dispensation).

Results One-hundred and fifty-nine MS involving 144 different medicines were recorded during the period of study. Anti-neoplastics (14.5%) and cardiac therapy (10.1%) were the main therapeutic groups affected. In 54 cases (34%) it was necessary to import the active substance. In 43 cases (27%) a controlled medicine distribution programme was initiated to ensure a sufficient supply of medicines to patients. In 26 cases (16.4%) the active substance was purchased from a different manufacturer and in 25 cases (15.7%) a different dosage form was obtained. A therapeutic alternative was used in 11 cases (6.9%), with two of these requiring an importation of a foreign medicine.

35.2% of the MS led to a foreign medicine importation, which represents 26% of our total foreign medicine request applications in a year. According to Spanish law, foreign medicines must be provided by the HP and in 33 cases (20.8%) the medicine distribution circuit changed. One-hundred and eight (67.9%) of the MS registered were informed by HA during the study period.

Conclusion MS represent a significant increase in the hospital pharmacist activity, mainly focused on executing administrative tasks and planning for strategies to maintain the medication supply. Furthermore, this problem implies attending new out-patients who usually collect their medication at the CP. The lack of communication of MS supposes a cause of distress for patients, as they are unaware of the current medicine distribution circuit, and a real risk for treatment discontinuation.

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2SPD-036 STORAGE AND DISPENSING OF SOLID ORAL DOSAGE FORMS FROM MULTIPLE UNIT CONTAINERS

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Background Solid oral dosage forms packed in multiple unit containers (SODF-MUC) are exposed, when the package is