

11SG-014 RHEUMATOID ARTHRITIS: BIOLOGICAL DRUGS PHARMACEUTILISATION ANALYSIS IN AN ITALIAN DISTRICT

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Background Rheumatoid arthritis is a chronic systemic inflammatory disease that concerns, above all, the industrialised countries and it has a high rate of development. According to the World Health Organization, the rheumatoid arthritis prevalence in the world is between 0.3% and 1% and in Italy is equivalent to 0.33/100, that is about 2 00 000 patients.

Purpose The aim of this work consists in comparing prescriptions between an Italian district, including 6 00 000 citizens, and regional and national prescriptions, in order to make a pharmaceutisation analysis.

Material and methods Immunosuppressive drugs have been analysed (Anatomical Therapeutic Chemical (ATC) classification: L04), employed in rheumatoid arthritis therapy, according to the defined daily dose (DDD), divided in the ATC classification, concerning the two-year period 2016/2017. Prescriptions concerning an Italian district, the region of belonging and the whole nation have been compared.

Results In an Italian north district, DDDs concerning immunosuppressive prescriptions for rheumatoid arthritis have been increased by 14.6% in 2017 compared with the previous year, however they are being on regional and national average. DDDs that have increased more concern secukinumab (+1135.3%) and, in less quantity, tocilizumab (+59.6%). In 2017, every molecules considered DDDs are increased except etanercept and infliximab in the region, and mycophenolate in general in the nation, compared to 2016. Immunosuppressive drugs belonging to ATC L04 totals 2.2% of the whole DDD. In 2017, DDDs increased in this district (+14.6%) and also in the region and national territory.

Conclusion From this analysis, it can be said that in 2017 there has been a DDD increase in molecules belonging to ATC L04 prescribed for rheumatoid arthritis. The pharmaceutical market is booming thanks to the frequent introduction of new molecules and the updating of new therapeutic indications. It is necessary for continuous training of prescribers and pharmacists to ensure prescriptive appropriateness in order to deliver suitable and effective therapy to patients, and economic sustainability.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Biosimilar position paper AIFA.

No conflict of interest.

11SG-015 OPTIMISATION OF BIOLOGICAL THERAPIES IN THE TREATMENT OF PSORIASIS

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Background The use of biological treatments for psoriasis involves a significant improvement in disease management. However, the economic impact of its use on health systems is high.

Optimised treatment patterns of biological therapies, in clinically controlled patients, attempt to find a more efficient use of these drugs.

Purpose To analyse patients with psoriasis on an optimised pattern of biological treatment and to estimate the annual saving of these optimised patterns in a third-level hospital.

Material and methods Observational, retrospective and longitudinal study of psoriasis patients treated with biologic drugs in a general hospital of 650 beds. Medical records review and a retrospective analysis of prescriptions registered in the integral external Patient Information System and in the computerised History System was carried out up to 30 September 2018.

We recorded demographic data (age, sex), type of biological therapy, clinical control of disease, optimised therapy yes/no and the annual economic impact due to every drug in an optimised pattern.

Results One hundred and fifty patients diagnosed with psoriasis were included, 102 (68%) men and 48 (32%) women, aged between 9 and 87 years (median 46.8 years).

Patient distribution according to the biologic drug used, number of patients in optimised treatment patterns and the estimated saving per patient per year are included in table 1.

Abstract 11SG-015 Table 1

Biological Drug	Total Patients	Optimised Therapy Patients	Estimated Saving Per Patient Per Year (€)	Estimated Saving Per Year (€)
Etanercept	7	3 (42.86%)	3700*	11 200
Adalimumab	33	11 (33.35%)	4600*	50 900
Ustekinumab	73	23 (31.5%)	7200*	62 000
Secukinumab	15	6 (40%)	4000*	23 900
Ixekizumab	7	1 (14.9%)	2300	2300
Apremilast	15	4 (26.67%)	4200*	16 900
Total	150	48 (32%)*		167.200

*median

Forty-eight patients (32%) were in treatment with an optimised biological therapy pattern.

It is estimated that with these optimised biological therapies the annual saving is around € 1 60 000.

Conclusion The number of our patients receiving individualised biological treatment for psoriasis is more than one-third, which allows the same clinical effects with less economic impact on our health system.

The estimated savings per year in our hospital due to optimised biological treatments for psoriasis is important because quality of treatment is not affected.

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No conflict of interest.

11SG-016 COST-EFFECTIVENESS OF MORPHINE VERSUS FENTANYL IN MANAGING VENTILATED NEONATES WITH RESPIRATORY DISTRESS SYNDROME IN THE INTENSIVE CARE SETTING

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Background The use of opioids as sedatives is necessary for agitated neonates undergoing mechanical ventilation (MV) with respiratory distress syndrome (RDS) in a neonatal