

criteria, to take part in the study. Those participants were then asked to refer to one or more colleagues for possible study enrolment. Once referred, the researchers then contacted potential participants to explain the study and assess their interest and eligibility. Interviews were conducted either on the telephone or face to face, at a mutually agreeable time and place from May to September 2019. Participants were eligible to take part if they were doctors, pharmacists or nurses, able to communicate in Arabic or English, and were aged ≥ 18 years. Interviews were conducted as needed until data saturation was achieved. Interviews were audio recorded, transcribed verbatim and analysed thematically using NVivo 10 software. Ethics approval was obtained from Imam Abdulrahman bin Faisal University.

Results Four overarching themes were identified in this study: 'types of shared medications' such as antibiotics, antihypertensives, cardiovascular, diabetic and cholesterol medicines; 'perceived benefits of sharing medicines' such as social support and saving time and money; 'negative experience of sharing medicines' such as personal and public health risks; 'reasons for medication sharing' such as lack of access to healthcare services or medicines, lack of medication knowledge, cost of medication, forgetfulness, medication non-adherence and altruistic reasons. Cultural influence, excessive amount of medication supply and lack of information about safe disposal were reasons that appeared to be specific to the Saudi culture.

Conclusion and relevance PMS was perceived as a behaviour with positive and negative outcomes. Interventions should be established to reduce PMS behaviour.

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No conflict of interest.

5PSQ-079 IMMUNOTHERAPY IN METASTATIC MELANOMA: A MIRACLE OR POISON

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Background and importance Very significant therapeutic advances have been made with regard to immunotherapy in the treatment of metastatic melanoma. The use of monoclonal antibodies, particularly pembrolizumab, has shown encouraging results in terms of efficacy and survival in cancer patients, but some patients develop adverse reactions that can sometimes be fatal, or their management may require temporary or permanent interruption of treatment.

Aim and objectives We report the case of a patient who had immunological adverse reactions to pembrolizumab for metastatic melanoma.

Material and methods A 59-year-old patient was managed for lower limb melanoma in advanced locoregional evolutionary pursuit classified as T3b N3 M0. The absence of a BRAF mutation led to the introduction of immunotherapy with the

anti-PD1 antigen pembrolizumab. Two weeks after the second injection, an initial and transient increase in tumour size with the appearance of new small lesions was noticed, associated with intense fatigue, taste alteration with loss of appetite and constipation. After the third injection, a false progression of the tumour was noticed, requiring discontinuation of treatment. The patient was hospitalised for undernutrition with sudden weight loss, asthenia and general deterioration. Biological examinations revealed anaemia with severe undernutrition. Fatigue and altered condition did not allow the patient to undergo scheduled chemotherapy. The patient died within 3 months. The accountability study was carried out in accordance with the French method.

Results In this case, pembrolizumab was implicated with an imputability score of I5 B4, according to the French method.

Conclusion and relevance New immunotherapy approaches are characterised by a range of new toxicities that must be known, not only by medical oncologists and by all those involved in the management of oncology patients. Early detection of immunological toxicities and early application of available algorithms allow for complete resolution of symptoms in the majority of cases. However, if these symptoms are neglected, the development can lead to serious toxicities, including death of the patient.

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No conflict of interest.

5PSQ-080 ASSESSMENT OF DOSE PREPARATION PRACTICES FROM LIQUID ORAL FORMS BY MOTHERS OF CHILDREN HOSPITALISED IN OUR PAEDIATRIC DEPARTMENT

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Background and importance In our paediatric department, we welcome low income populations, it is the mothers who take care of the administration of oral treatments to their children. Because of the high rate of illiteracy among these mothers, this situation can lead to administration errors, particularly when it comes to oral presentations with a liquid administration device.

Aim and objectives To study the dose preparation errors of liquid oral forms by the mothers of hospitalised children.

Material and methods This prospective observational study was conducted in our paediatric department, between March and June 2019. During this period, interviews including a questionnaire in dialectal Arabic on how to use the liquid oral forms they administer to their children (administration schedule, preservation and interchangeability of graduated pipettes) were conducted. Subsequently, the preparation of drug intake of the two most prescribed liquid oral