by the oncology and haematology departments. An economic value (ex-factory price) was assigned to the high cost drugs destroyed on-site or returned to the sponsor. We considered 5 days up to the effective expiry date to create a useful range for their potential use.

**Results** Twenty-six drugs were destroyed on-site and 69 returned to the sponsor from 4 compassionate use programmes, 11 non-profit clinical trials and 34 profit clinical trials: in 55.8% of cases the drugs had not expired (€2.3 million). In 5 of 21 cases (23.8%) the non-expired drugs had been destroyed or returned in the non-profit clinical trials compared with 46 of 70 cases (65.7%) in the profit clinical trials. The economic value of the high cost drugs on the market was about €4.1 million (64.2% oncological, 35.8% haematological drugs), which is about 29% of the total annual value of €14.5 million for infusion drugs managed by our pharmacy.

**Conclusion and relevance** Based on our data, the drug supply process needs to be improved and greater collaboration is needed (between AIFA-sponsored clinical trial centres-CRO) to reduce the waste described and optimise the available economic resources.

**REFERENCES AND/OR ACKNOWLEDGEMENTS**

[Links to references]

No conflict of interest.