

patients. This increase in CCS patients in 2020 seems to explain the 10 year reduction in the median age of death and the increase in mortality. In 2020, the number of PN prepared by the PS nearly tripled in comparison with the same period in 2019. They were individually adapted to each patient's requirements, which led to a substantial increase in the care load and the preparation of the PN.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of interest No conflict of interest

4CPS-220 PATIENT SATISFACTION WITH PHARMACIST EDUCATION ON ORAL ANTICOAGULANT MEDICATION

D Murphy*, M Kieran, J Brown. *Mater Misericordiae University Hospital, Pharmacy Department, Dublin 7, Ireland*

10.1136/ejhpharm-2021-eahpconf.52

Background and importance Oral anticoagulants are internationally recognised as high risk medications that can cause significant patient harm when used in error.¹ High patient adherence to oral anticoagulant treatment is essential to avoid thrombosis or stroke. The pharmacy department has prioritised the provision of medicines education to all inpatients newly started on an oral anticoagulant. Both verbal education and a warfarin or direct acting oral anticoagulant (DOAC) booklet are provided to all patients. A DOAC booklet was developed and introduced in 2017.

Aim and objectives To assess patient satisfaction with oral anticoagulant education provided by pharmacists and to obtain feedback on the new DOAC booklet.

Material and methods The study took place over a 6 week period (February to April 2018). All patients provided with pharmacist education on an oral anticoagulant were requested to complete a patient satisfaction survey after the education session. Patients had the option to decline participation in the study. The survey assessed if the patient found the information useful, the quantity of information discussed and the medium of communication considered most beneficial.

Results 30 patients were involved in this study. 40% (n=11) of patients were prescribed warfarin, with the remaining 56% (n=17) prescribed a DOAC (apixaban n=12, rivaroxaban n=4, dabigatran n=1). All patients reported that the verbal and written information was useful and that they were happy with the amount of information discussed. 97% of patients (n=29) reported that they understood the information discussed. When asked which format of communication was most beneficial, the majority (n=16) of respondents answered both verbal and written communication. All patients (n=16) who had read the DOAC booklet reported that it was helpful.

Conclusion and relevance The results of this study demonstrated patient satisfaction with pharmacist education on newly commenced oral anticoagulants. Most education sessions were for DOACs, reflecting the change in prescribing practices and the trend away from warfarin. The preferred medium of education varied between patients. The results suggested that pharmacists should continue to use both verbal and written education to account for patient preference and understanding. Patients reported that they found the new DOAC booklet helpful.

REFERENCES AND/OR ACKNOWLEDGEMENTS

1. Institute for Safe Medication Practices (ISMP). *ISMP List of High-Alert Medications in Acute Care Setting*. 2018 cited 2018 December/28

Conflict of interest No conflict of interest

4CPS-221 EFFECT OF SARS-COV-2 PANDEMIC ON DIRECT ORAL ANTICOAGULANT USE IN THE PRIMARY CARE SETTING

¹M Larrosa García*, ²E Fernández Liz, ¹P Lalueza Broto, ¹S García García, ²ME Barceló Colomer, ³P Cortés Pérez. ¹Vall D'Hebron University Hospital, *Clinical Pharmacy, Barcelona, Spain*; ²Institut Català De La Salut, *Department De Farmàcia, Barcelona, Spain*; ³Institut Català De La Salut, *Department De Estadística, Barcelona, Spain*

10.1136/ejhpharm-2021-eahpconf.53

Background and importance Direct oral anticoagulants (DOAC) were moderately used in the primary care (PC) setting due to their associated risks in elderly and their high cost. In contrast, acenocumarol was much more common in Catalonia, even though it requires intense monitoring. During the SARS-CoV-2 pandemic, the use of DOAC has been encouraged to reduce patient medical visits.

Aim and objectives To analyse the change in DOAC use in our area and to evaluate prescription appropriateness.

Material and methods This cross sectional study analysed the use of DOAC in a PC population in Barcelona in September 2020. The results were compared with historical data from December 2018. Demographic variables (age, gender), pharmacotherapeutic data (drugs, dose, frequency) and clinical data (glomerular filtration (GF), international normalised ratio (INR), CHA2DS2-VASc score) were obtained from the electronic medical record (September 2020). Prescription appropriateness was evaluated according to the drugs' summary of product characteristics.

Results The study included 351 732 patients in 2018 and 364 350 in 2020; 9194 (2.65%) and 10 017 (2.75%) of the patients were treated with oral anticoagulants (OA), respectively.

Prevalence of OA use:

- 2018: acenocumarol 5734 (62.4%), warfarin 133 (2.3%), apixaban 1006 (10.9%), edoxaban 309 (3.4%), dabigatran 532 (5.8%) and rivaroxaban 1480 (16.1%).
- 2020: acenocumarol 3804 (38.0%), warfarin 157 (1.6%), apixaban 1875 (18.7%), edoxaban 959 (9.6%), dabigatran 712 (7.1%) and rivaroxaban 2510 (25.1%).

Comparison of prevalence between 2018 and 2020:

- Decrease in acenocumarol (62.4% vs 38.0%, $p < 0.0001$).
- No change in warfarin (1.45% vs 1.6%, $p < 0.05$).
- Increase in DOAC (36.2% vs 60.5%, $p < 0.0001$), specifically: increase in edoxaban (9.3% vs 15.8%, $p < 0.0001$), no change in apixaban (30.2% vs 31.0%, $p < 0.05$) and decrease in dabigatran and rivaroxaban (16.0% vs 11.8% and 44.5% vs 41.5%, respectively, $p < 0.05$).

DOAC prescription appropriateness in 2020 (among 6056 patients):

- The main indication was atrial fibrillation (5881 patients, 97.1%).
- 373 men had CHA2DS2-VASc < 2 and 240 women had CHA2DS2-VASc < 3 .