

medication administration. Analysis of the reality will serve as a base to develop suggestions leading to preventive and corrective actions with consequences for the quality of nursing care provided.

One of the risk areas of nursing care is timing drug administration with food as well as food and drink composition. The partial goal was to explore this reality and identify sub-optimal and potentially hazardous practices.

Material and methods The research was implemented in four selected cooperating hospitals, specifically in three of their wards – surgical, internal, and follow-up wards in the form of a prospective, multicentric, observation–intervention study. In the first part of this study, all nurses administering medications to all patients hospitalised in each of the above-stated wards during the observation period (morning, noon, evening) were observed by a team of unshadowed external investigators (pharmacist and nurse) for three consecutive days. Data were recorded onto a pre-prepared recording sheet and subsequently typed into a web database.

Results During this study, 58 nurses administering 5330 solid oral drugs for 313 patients over 36 days were observed. We discovered that the timing of the food was suboptimal and potentially severe in 18.1% and 2.4% of cases, respectively. In order to ingest a drug, tea was used in 63% of cases, still water in 22% of cases and coffee with milk in nearly 5.8% of cases. Potentially significant drink–drug interactions were identified in nearly 1.5% of cases.

Conclusion and relevance We found that little or no attention was paid to appropriate food, drink and drug management on the wards. These primary data will be used for interventions in this study and as the base for further research.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of interest Corporate sponsored research or other substantive relationships: Work was supported by a grant from Charles University (SVV 260 551).

Section 6: Education and research

6ER-001

CAN PHARMACISTS IMPROVE THEIR PATIENT COMMUNICATION BY READING FICTION? NARRATIVE MEDICINE IN PHARMACY PRACTICE – A FEASIBILITY STUDY

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10.1136/ejhpharm-2022-eahp.354

Background and importance Empathy is an essential part of good patient communication. However, pharmacists often provide information without taking patients' preferences into account. Narrative medicine is an innovative approach, where empathic skills are nurtured through close reading of literary texts and creative writing.

Aim and objectives The purpose was to investigate the feasibility of a narrative medicine course for pharmacists and to explore the experiences of the participating pharmacists.

Material and methods A 2-day course of narrative medicine was offered to Danish community and hospital pharmacists in

Summer 2020. The course capacity was set at 16 pharmacists. The course consisted of close reading of short literary texts about illness and related creative writing, facilitated by both experienced literary and health care professional lecturers. Pharmacists' empathy was assessed before and after participating in the course with the Jefferson Scale of Empathy (JSE). Feasibility was assessed focusing on acceptability, demand, implementation, practicality and limited efficacy using focus group interviews, participant observation and a satisfaction questionnaire.

Results In total, 8 pharmacists participated in the course. All pharmacists answered the questionnaire, and 5 focus group interviews were held with participants and lecturers. The practicality of the course can be optimised, as only half of the course capacity was filled. This could, however, be due to the situation with the COVID-19 pandemic, as the workload at the pharmacies was unpredictable in that period. The pharmacists accepted participation in the course, even though some of the sessions required a personal investment far from their normal routines and education. The pharmacists were, in general, very satisfied with the course and found it useful in their daily patient communication as it helped them to envision the life of each patient. As expected, no significant change was found in the JSE, but the pharmacists found the scale acceptable to complete.

Conclusion and relevance The course in narrative medicine was feasible on all assessed parameters, even though the course capacity was not fully utilised. A course in narrative medicine has potential for improving pharmacists' general communication with patients. Yet, the results should be tested in larger studies, including patient-reported outcomes, to provide distinct evidence on eventual effect.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of interest No conflict of interest

6ER-002

APPLYING REFLECTIVE MULTICRITERIA DECISION ANALYSIS TO UNDERSTAND THE VALUE OF THERAPEUTIC ALTERNATIVES IN THE MANAGEMENT OF ANAEMIA IN GYNAECOLOGIC SURGERY

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10.1136/ejhpharm-2022-eahp.355

Background and importance Iron deficiency anaemia is the most prevalent nutritional deficiency, affecting 29% of women. It is common in patients undergoing elective gynaecological surgeries (18.1%) and up to 90% postsurgery, increasing the risk of negative outcomes and need for transfusions. Oral iron, especially ferrous sulphate (FS), is used as the most common treatment and intravenous iron is solely used in severe cases. Ferric carboxymaltose (FCM) has demonstrated clinical benefits above FS but it is not widely used due mostly to its high cost.