interstitial pneumonia and 1 anxiety attack that forced a change in treatment) and 5 with the use of tofacitinib (1 herpes zoster, 1 dry lip, 1 tinnitus, 1 oedema and 1 dyslipidaemia). Of the 21 patients with baricitinib, 4 changed treatment due to ineffectiveness (2 to tofacitinib and 2 to biologics), and of the 11 treated with tofacitinib 2 switched to biologics and 1 suspended treatment due to cardiovascular risk.

Conclusion and relevance In our clinical experience, baricitinib and tofacitinib are shown to be effective in the treatment of RA, with a good safety profile.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of interest No conflict of interest

Abstract 4CPS-146 Table 2 Validation parameters according to FDA guidance

Analyte	Rt (min)	Equation	R^2	Within-day mean (µg/mL) (%VC)			Between-day mean (µg/mL) (%VC)		
				Low	Medium	High	Low	Medium	High
Voriconazole	3.7	y= 0.2363x-0.0083	0.9992	1.56 (3.6)	3.47 (1.3)	6.57 (0.6)	1.56 (4)	3.43 (1.5)	6.51 (0.6)
Isavuconazole	5.8	y= 0.6587x+0.0326	0.0999	1.38 (0.5)	4.82 (0.1)	9.19 (0.1)	1.43 (1.2)	5.14 (0.2)	9.12 (0.6)
Posaconazole	4.1	y= 0.6485+0.0008	0.9989	0.51 (0.8)	1.04 (1.27)	1.39 (0.8)	0.47 (1.23)	0.91 (2.3)	1.29 (1.24)

4CPS-146 DEVELOPMENT AND VALIDATION OF A RAPID HIGH-PERFORMANCE LIQUID CROMATOGRAPHY METHOD (HPLC) FOR THE DETERMINATION OF TRIAZOLES IN HUMAN PLASMA

[1]MJ Tirado Pérez*, [1]A Martínez Escudero, [2]FJ García Moreno, [1]A Aguado Paredes, [1]M Cameán Fernández, [1]V Merino Bohórquez. *[1]Clinical Pharmacist, Hospital Universitario Virgen Macarena, Sevilla, Spain; [2]Clinical Pharmacist, Hospital General Universitario Gregorio Marañón, Madrid, Spain*

10.1136/ejhpharm-2022-eahp.161

Background and importance The incidence of invasive fungal infections has increased significantly. Triazoles are the antifungals of choice for pulmonary aspergillosis, but they have a high intra- and interindividual variability in pharmacokinetics and are associated with a large number of interactions, thus requiring analytical techniques that allow therapeutic drug monitoring to ensure the effectiveness and safety of these drugs.

Aim and objectives The aim of this study was the development and validation of a high-performance liquid chromatography (HPLC) method for measuring voriconazole, isavuconazole and posaconazole in human plasma using tioconazole as an internal standard.

Material and methods The system consisted of an Agilent 1260 Infinity chromatograph with an ultraviolet diode array detector (UV-DAD). The column used was a Kinetex F5 4.6 ×150 mm, 5 µm (Phenomenex, USA). The method was validated according to the Food and Drug Administration (FDA) bioanalytical method validation guidance. The analysis run time for all drugs was 7.5 min. The chromatographic conditions are shown in Table 1. To process the samples were taken 100 µL of internal standard, 200 µL of plasma and 300 µL of acetonitrile. Then, they were homogenised for 30 s and centrifuged at 15 000 g for 5 min.

Results The results are shown in Table 2.

Conclusion and relevance A method has been validated for the determination of triazoles by HPLC in human plasma that will allow therapeutic drug monitoring to be performed in target patients.

REFERENCES AND/OR ACKNOWLEDGEMENTS

1. Laverdiere M, Bow EJ, Rotstein C, Autmizguine J, Broady R, Garber G, *et al*. Therapeutic drug monitoring for triazoles: a needs assessment review and recommendations from a Canadian perspective. *Can J Infect Dis Med Microbiol* 2014;25 (6):327–343.

Food and Drug Administration (FDA). Guidance for Industry, Bioanalytical Method Validation; 2018. https://www.fda.gov/media/70858/download

Conflict of interest No conflict of interest

4CPS-147 EXPERIENCE OF USE OF BIOLOGICAL ANTIMIGRAINE TREATMENTS IN CLINICAL PRACTICE

Z Martinez-Echevarria Gil-Delgado, M Fages*, A Salguero Olid, J García Marín, A Moreno Herrera. *Hospital Punta de Europa, Pharmacy, Algeciras, Spain*

10.1136/ejhpharm-2022-eahp.162

Background and importance The comparative efficacy and safety of antimigraine monoclonal antibodies (mAb) is not known in clinical practice.

Aim and objectives Describe the clinical experience of using mAb in migraine management.

Material and methods Retrospective descriptive research of patients with migraine treated with erenumab, fremanezumab or galcanezumab between October 2019 and September 2021. All patients had 8 days of migraine monthly and 3 failures to prophylactic treatments, one of these being botulinum toxins. In all cases, the administration was monthly with a dose of 70 or 140 mg for erenumab, 225 mg for fremanezumab and 120 mg for galcanezumab (after a single dose of 240 mg the first month). Efficacy was evaluated at 12 weeks and considered: reduction of monthly headache days, reduction to 50% of the number of attacks, decrease in the consumption of symptomatic medication, and discontinuation.

Abstract 4CPS-146 Table 1 Chromatographic conditions of methods

Analyte	Mobile phase	λ (nm)	Calibration range (mg/mL)	Flow (mL/min)	Temperature (°C)	Injection volume (mL)
Voriconazole	60% Buffer ($KH_2PO_4$0.05 M pH=3.5)/40% acetonitrile	254	1–7	1	25	40
Isavuconazole	50% Buffer ($KH_2PO_4$0.05 M pH=3.5)/50% acetonitrile	260	0.5–10	1	25	50
Posaconazole	50% Buffer ($KH_2PO_4$0.05 M pH=3.5)/50% acetonitrile	260	0.3–1.5	1	25	50