

Abstract 2SPD-014 Table 1

Parameter	Result
Average age (years)	46.5
Crohn's disease diagnosis	100%
Previous adalimumab and infliximab	19.5%
Previous adalimumab	50.1%
Previous infliximab	19.5%
Previous vedolizumab	4.3%
Previous anti-TNF $\alpha$ and vedolizumab	6.6%
Median dose ustekinumab	38.8 mg
Combination therapy azathioprine	27.1%
Combination therapy budesonide	18.6%
Combination therapy methotrexate	2.2%
Combination therapy budesonide + thiopurine	6.6%
No combination therapy	45.5%
Dose intensification	8.8%
Interval intensification	30.1%
Dose and interval intensification	6.6%
No intensification	54.4%
Drug trough concentrations/antidrug antibodies measurement (% patients)	35.2%
Monitoring not applicable	19.11%
Adalimumab <7.5	6.6%
Adalimumab <7.5 with positive antibodies	2.2%
Infliximab <5	6.6%
Infliximab <5 with positive antibodies	2.2%
Undetectable concentration	4.4%
Undetectable concentration with positive antibodies	2.2%
Primary failure	13.23%
Secondary failure	56.6%
Adverse reactions	13.23%
Refused treatment	6.6%
Unknown reason	10.34%
Symptoms reason + mucosal inflammation reason + biomarkers reason	10%
Symptoms reason	58%
Symptoms reason + mucosal inflammation reason	32%
Inappropriate prescription	56.1%

## REFERENCES AND/OR ACKNOWLEDGEMENTS

Overview of medical management of high-risk adult patients with moderate to severe Crohn's disease up to date. <https://www.uptodate.com/contents/overview-of-medical-management-of-high-risk-adult-patients-with-moderate-to-severe-crohn-disease>

**Conflict of interest** No conflict of interest

## 2SPD-015 LOGISTICS AUTOMATION AND PROCESS RE-ENGINEERING: IMPACT ON INTER-HOSPITAL LOAN MANAGEMENT

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10.1136/ejhp2022-eahp.16

**Background and importance** Inter-hospital loans are part of the usual practice in the hospital Pharmacy Department.

Optimisation of this process is key to improved utilisation of resources and time by the hospital pharmacist.

**Aim and objectives** To evaluate the impact on pharmacist time and economic savings after the automation of the drug storage system in the Pharmacy Department and after the redesign of the inter-hospital loan requesting process (HLRP).

**Material and methods** Retrospective observational study in which we analysed the loan registry of a Pharmacy Service in 2016 (pre-intervention period) and 2019 (post-intervention period). Regarding the redesign of the process, in 2019 all the stages involved were defined, as well as the professional profile involved in each of them, in this case administrative assistants, pharmacy technicians and pharmacists. The cost in personnel time was estimated based on the average salary of each professional profile. For the pre-intervention period, a multidisciplinary group defined by consensus the time invested by each role involved in HLRP. For the post-intervention period, the times were measured by direct observation. A transport service cost of € 34 per loan was given by the company contracted for this purpose.

**Results** The number of loan requests was 83 in 2016 vs 61 in 2019, a reduction of 24.20%. There was a reduction of 13 min in the total time spent on HLRP (50 min in 2016 compared to 37 min in 2019). The cost derived from the request of each loan was € 55 in 2016 vs € 40.60 in 2019, resulting in an annual saving of € 2086.98 (45.73%). Overall expenditure was € 4563.57 in 2016 vs € 2476.59 in 2019. Finally, the time spent by the pharmacist decreased from 50 min in 2016 (100% of the activities and time spent) to 2 min in 2019 (5.4% of the time), used only in the assessment of the number of pharmaceutical units requested in the loan. In the post-intervention year this resulted in savings of up to 35.58 hours of pharmacist time spent.

**Conclusion and relevance** The automation of medication storage systems, together with process re-engineering, improves the efficiency of medication loan management, freeing up pharmacist time to perform more value-added tasks.

## REFERENCES AND/OR ACKNOWLEDGEMENTS

**Conflict of interest** No conflict of interest

## 2SPD-016 APPLICATION OF FAILURE MODE AND EFFECT ANALYSIS TO IMPROVE CYTOSTATIC DRUG STOCK MANAGEMENT

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10.1136/ejhp2022-eahp.17

**Background and importance** Drug stock management is a complex process because space, budget and other external factors such as delivery delays or demand variability must be taken into account. To manage a drug stock properly is a pharmacist's responsibility.

**Aim and objectives** To carry out a failure mode and effect modal analysis (FMEA) in the cytostatic drug store to improve the stock management process.

**Material and methods** A multidisciplinary team was assembled to perform the detection of failure modes and their causes through FMEA methodology. Then, risk priority index (RPI) was calculated: frequency (F)  $\times$  severity (G)  $\times$  detectability