prescription and dose of idarucizumab; response to treatment (normalisation of aPTT and clinical evolution).

Results Fifty-four patients prescribed idarucizumab were identified. One patient was excluded because active treatment was declined (n=53). Median age was 82 years (RIQ: 75-88.5), 58.5% male and 41.5% female. The indication for dabigatran was stroke prevention and systemic embolism due to non-valvular atrial fibrillation in 52 patients and stroke in 1 patient. The doses of dabigatran reported in the medical records were: 150 mg/12 h in 16 patients, 110 mg/12 in 34 patients and 75 mg/12 in 1 patient (no data in 2 patients). Thirty-six patients received idarucizumab for major bleeding, 12 for urgent surgery, 3 for urgent invasive procedure and 2 for supratherapeutic levels of dabigatran. In all cases the indication was established by the haematology department. Median aPTT before antidote administration was 46.95 seconds (RIQ: 35.2-52.5) (n=52); 1 patient had supratherapeutic levels of dabigatran, showing incoagulable. Median aPTT after idarucizumab administration was 27.4 seconds (RIQ: 25-29.8) (no post-administration aPTT values in 6 patients). The dose of idarucizumab was 5 g in all cases. Four patients died. In 49 patients treatment was effective with no episodes of rebleeding or thromboembolism.

Conclusion and Relevance Idarucizumab was mostly used in major bleeding. Treatment was effective in 92% of the study population.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest

5PSQ-020 ANALYSIS OF A PHARMACEUTICAL INTERVENTION IN POLYMEDICATED PATIENTS TO INCREASE THE SAFETY AND ADEQUACY OF THEIR TREATMENT

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Background and Importance Polymedication has potential health risks for patients such as interactions and increased risk of adverse effects that can be fatal.

Aim and Objectives The aim of this study was to analyse a pharmaceutical intervention carried out by a group of pharmacists in patients taking 15 or more drugs concomitantly to improve the safety and adequacy of their prescriptions.

Material and Methods Pre-post study that included patients of any age, with 15 or more drug prescriptions, prescribed by a general practitoners (GPs) in the electronic prescription system, from January to December 2021. The intervention was performed by 9 pharmacists in 35 primary health-care centres (PHCC) and 673 GPs. They provide health care to 677,782 inhabitants. First, a general session was held in each PHCC, presenting the objectives and informative material. Subsequently, individual meetings were scheduled with each physician, in which the pharmacists provided the prescribers with lists of polymedicated patients (PP) and various local documents, STOPP/START, Beers criteria and clinical practice guidelines to help review treatments. Each prescribed drug was evaluated based on its necessity, effectiveness, appropriateness and safety. In addition, the pharmacists also issued review reports on patients with particularly complex pathologies. The reviews performed were recorded by the GPs in the digital health record. These records and lists of PP were extracted thanks to a local software application and analysed in Excel.

Results Pharmacists provided 39 group training sessions and 387 individual meetings to the Gps. A total of 1468 patients met the criteria for PP. Mean age 73.58 years+-11.14(58% women). Prescriptions of 91.7%of PP were reviewed at least once in 2021. A total of 4,848 reviews were performed.

In 14.41%of the cases, a new treatment was started. In 14.73%of the revisions, it was necessary to change the dosage or the prescribed treatment regimen. In 27.81%of the cases, the GPs cancelled a drug from the patient´s prescriptions. In 54.68%of the reviews, no change in treatment was made

Conclusion and Relevance The intervention had a high level of acceptance.

Despite the high percentage of patients reviewed, it is striking the high number of patients in whom, no change in their treatment was made, which raises the question of whether the reviews were correct.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest

5PSQ-021 AUTOMATION MEETS TRACEABILITY TO OPTIMISE DRUGS AND MEDICAL DEVICES LOGISTICS GUARANTEEING PATIENT SAFETY AND HOSPITAL STAFF WELL-BEING

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Background and Importance Hospital San Raffaele was seeking a solution to improve the medication management process and logistics, spanning from central pharmacy to the patient's bedside, in order to avoid shortage, improve staff well-being and patient safety by ensuring the five rights of medication administration (patient, drug, dose, time and route).

Aim and Objectives The Covid emergency, the shortage of personnel and the need to control healthcare spending, are key drivers in seeking innovative solutions to improve the efficiency in drugs and medical devices logistics.

The new system includes a new generation of automated carts and cabinets: before each round, the software predicts the overall need for drugs/medical devices.

The drugs are automatically loaded into the carts without any human intervention.

During the round, once the patient is identified, the automated cart retrieves the drug(s) to be administered and places them directly on the countertop.

The system tracks all the operations: which drug was administered, at what time and by whom.

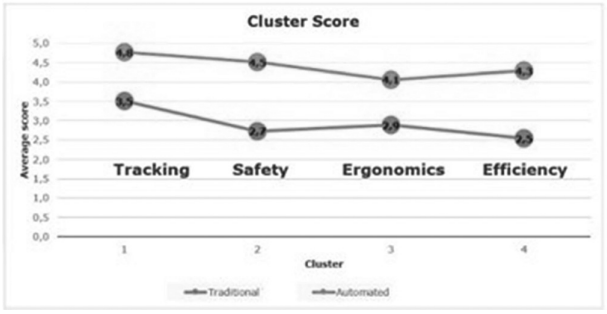
The new system enables end-to-end traceability ensuring the complete visibility to the hospital pharmacists/staff on drug flows from the central pharmacy up to medicines' administration and bringing many benefits such as: logistics optimisation and inventory accuracy by avoiding waste and shortage, while guaranteeing precise recalls/withdrawals and having a real-time visibility on the entire hospital stocks.Material and Methods

The study compared the new AUTOMATED solution versus the TRADITIONAL one by measuring different metrics and KPI.

A panel of nurses was selected to conduct the test with different profiles (age, experience, and confidence with IT applications). Each nurse was asked to carry on some cycles of the therapy dispensing and to express evaluations, in a ranking from 1 to 5, on several parameters related to:

- Tracking of all operations
- Patient Safety
- Ergonomics
- Efficiency

Results



Abstract 5PSQ-021 Figure 1

Conclusion and Relevance The results show that the automatic system is prevailing over all target metrics, with particularly a high gap on safety and efficiency, thanks to the reduction of non-value-added activities such as manual drugs replenishment of the stocks within cabinets and carts, enabling what really matters: the Patient Care.

This provides to the healthcare systems a new disruptive platform that makes the work of hospital staff easier, more efficient, reliable thus ensuring patient safety.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest

5PSQ-022 ANALYSIS OF HEALTHCARE VISITS TO EMERGENCY SERVICES FROM PATIENTS WITH PAINFUL VASCULAR ULCERS TREATED WITH TOPICAL SEVOFLURANE

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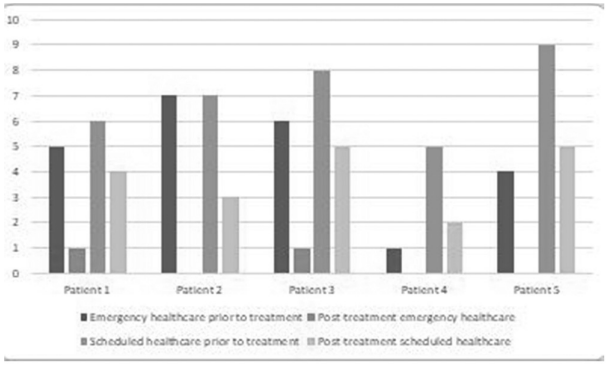
Background and Importance Patients with chronic vascular ulcers (VUs) suffer pain that is frequently managed with systemic analgesics such as opioids, exposing the patient to the secondary effects of these drugs. Therefore, there is a decrease in the patient's quality of life and an increase in emergency healthcare. Recently, sevoflurane has been shown to have a rapid analgesic effect when applied topically on VUs, providing a new therapeutic alternative in pain management.

Aim and Objectives To evaluate the analgesic effectiveness of topical sevoflurane in poorly controlled VUs using a comparative analysis of emergency and scheduled health care before and after the beginning of treatment.

Material and Methods A retrospective study was designed to quantify urgent and scheduled care visits in the 12 months prior to the beginning of treatment and in the 6 months after treatment of 5 patients (3 women and 2 men). Data were collected from the clinical database of the Andalusian Health System (Diraya). All patients had a high degree of comorbidity and VUs with uncontrolled pain.

Results The following figure shows the number of times that patients go to health services for uncontrolled pain associated with vascular ulcers. There is a decrease in emergency care visits in all the patients studied after the start of treatment. It should be pointed out that patients 2, 4 and 5 did not have to go to the health emergency services.



Abstract 5PSQ-022 Figure 1

Conclusion and Relevance This study seems to show a decrease in emergency healthcare after applying topical sevoflurane due to its role as an analgesic in patients refractory to conventional therapies. Obviously, relevant clinical trials are requiered to adequately establish the role of topical sevoflurane in the pain management.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest

5PSQ-023 SEVERE PHOTOTOXICITY REACTION ASSOCIATED WITH VANDETANIB: A CASE REPORT

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Background and Importance Vandetanib is a tyrosine kinase inhibitor used for the treatment of metastatic medullary thyroid cancer (MMTC). This drug has been associated with phototoxicity, but rarely severe.

Aim and Objectives To report a case of severe phototoxicity reaction associated with vandetanib.

Material and Methods The clinical management of a case with rare phototoxicity adverse reaction was described. Electronic medical records were used to collect patient data: baseline clinical context, adverse events, treatment, and clinical evolution. Naranjo algorithm was used by hospital pharmacist to stablish the causality of phototoxicity.

Results An 82-year-old man newly diagnosed with MMTC started treatment with vandetanib. After 12 days, he