

Section 3: Production and compounding

3PC-001 PREPACKED BOXES FOR OUTPATIENT PARENTERAL ANTIBIOTIC THERAPY (OPAT) – A QUESTIONNAIRE SURVEY ON KNOWLEDGE, OPINION AND WISHES

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Background and Importance To support a simple and quality-assured outpatient parenteral antibiotic therapy (OPAT) workflow, the hospital pharmacy offers specially prepacked boxes for use in the patient's home after discharge. There are boxes for three different antibiotics; benzylpenicillin, cefuroxime and piperacillin/tazobactam, containing antibiotic powder, utensils and solvent for three days of treatment. Another box contains only utensils and solvent for three administrations.

Aim and Objectives The aim is to explore knowledge, opinion and wishes to the prepacked antibiotic and utensils boxes in attempt to fulfil the needs of the hospital wards.

Material and Methods In an electronic questionnaire with 17 questions, one nurse at each hospital ward was asked about their knowledge, opinion and wishes to the antibiotics and utensils boxes.

All hospitals wards in Central Denmark Region that discharge patients to OPAT received a questionnaire. The questionnaire was designed after interview with two nurses and pilot tested by two other nurses on different wards.

Results 39 wards of 53 (74%) responded to the questionnaire. The results confirmed that the boxes are valued in the OPAT workflow on the hospital wards. 87% knew about some of the antibiotics boxes, 59% knew about the utensils box. There was agreement (97%) that the uniformity that comes with the boxes, contributes to patients' safety in primary-care.

There was general satisfaction with the number of treatment days in the boxes. One third of respondents would have liked a supplementary box with one day of antibiotic treatment, enabling a more flexible solution and reduced drug waste. 25% would like boxes containing other antibiotics.

Several commented on the availability of the boxes on the wards, as a factor that sometimes prevents use.

Conclusion and Relevance The survey shows that the boxes are known and highly appreciated, but there is a need to increase knowledge about all the boxes and improve their availability.

Currently the existing prepacked boxes cover most cases of OPAT, but a supplement of a one-day treatment may provide a more flexible solution with less drug waste.

To evaluate the wishes for other antibiotics in prepacked boxes, more data about use of antibiotics for OPAT patients is needed.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest

3PC-002 HAZARDOUS DRUG AND ANTIBIOTIC RESIDUE SURFACE CONTAMINATION – IS THERE A NEED TO REDUCE EXPOSURE?

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Background and Importance Exposure to Hazardous Drugs (HD) is a potential health risk. Multiple regulatory agencies have provided guidance involving enhanced cleaning procedures and the use of Closed System Transfer Devices (CSTDs) to minimise the risk of exposure. However, despite the potential for side effects involving the use of antibiotics (ABs), guidance has not been provided for facilities to reduce or minimise these risks.

Aim and Objectives The aim of this study was to identify the level of AB and HD surface contamination in a hospital pharmacy and eight wards to increase awareness for the need for enhanced controls involved in AB use.

Material and Methods Six HDs were analysed in four surface wipe samples from a pharmacy and two wards. Sampling was repeated four times (trials) over a period of eight months (288 endpoints). A CSTD was used for HD preparation during the entire study. Eight ABs were analysed in two surface wipe samples from six wards collected during the four trials (384 endpoints). Sampling was at the same timepoints as for HD sampling. A CSTD was not used in AB handling. Enhanced cleaning was implemented following the first trial. Samples were analysed with liquid chromatography tandem mass spectrometry.

Results HD surface contamination was detected in 6% of the samples collected during the four trials. Samples with high levels of contamination were not found. AB surface contamination was detected in 68% of the samples. 15% of the samples show high levels of contamination. Despite enhanced cleaning procedures, AB contamination was increased in the last trials compared to the initial trials.

Conclusion and Relevance The study illustrates that institutional guidance, involving the use of a CSTD and effective cleaning, has proven to be effective to minimise unintentional exposure of healthcare workers to HD surface contamination. On the contrary, guidance, controls and cleaning were not sufficient to reduce surface contamination with potential harmful ABs.

REFERENCES AND/OR ACKNOWLEDGEMENTS

- Alert and action levels for surface contamination with HDs in The Netherlands (https://www.dokterhoe.nl/fileadmin/user_upload/documents/cytostatica/meetstrategie-werkinstructie.pdf)

Conflict of Interest Corporate sponsored research or other substantive relationships:

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3PC-004 ECONOMIC SAVINGS OF ERENUMAB REDOSING IN A THIRD-LEVEL HOSPITAL

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