



Abstract 6ER-026 Figure 1

Conclusion and Relevance HF treatment access varied significantly across countries and according to patient wealth index.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest.

6ER-027 ASSESSMENT OF ATTITUDES AND PERCEIVED SKILFULNESS OF PHARMACY STUDENTS IN CARING FOR UNDERSERVED POPULATIONS

¹JE Clark*, ¹G Ulangkaya, ¹M Watler, ²J Valdes Ledma. ¹University of South Florida, Taneja College of Pharmacy, Tampa, USA; ²University of South Florida, Taneja College of Pharmacy, Tampa, USA

10.1136/ejhpharm-2023-eahp.350

Background and Importance Studies indicate that gaps in knowledge about underserved patient care issues may be associated with the level of comfort and attitudes of pharmacy students caring for underserved patients.

Aim and Objectives The objective of this study was to assess the attitudes, perceived knowledge, and skills of pharmacy students to deliver care to underserved populations.

Material and Methods 385 pharmacy students were eligible to participate in the study. Students completed a modified version of the Health Professionals' Attitudes Toward the Homeless Inventory administered between December 2020 and January 2021. Each participant was asked to rate their level of agreement with 8 statements concerning attitudes toward the underserved and 8 statements regarding perceived skilfulness in caring for the underserved in providing medication reconciliation services and patient counselling on a scale from 1 to 5.

Results The response rate was 22% (n=85). Most students felt comfortable providing medication therapy management (78%), medication reconciliation (79%), and patient counselling (78%) services. 88% felt they knew how to communicate with patients from different cultural backgrounds. The average perceived skilfulness in completing medication reconciliation activities varied longitudinally across class years (P1, 3.4 ± 1.08 ; P2, 4.27 ± 1.01 ; P3, 4.8 ± 1.01 ; P4, 5.0 ± 0.89). The average perceived skilfulness in addressing patients from different cultural backgrounds was highest for students in the P1 years (4.09 ± 1.12) and lowest for students in the P2 class year (3.91 ± 1.21).

Conclusion and Relevance The attitudes and comfort levels of students toward underserved populations did not differ significantly between class years. The perceived skilfulness increased longitudinally between first and fourth-year students in the areas of conducting medication reconciliation activities, counselling and assessing medication understanding in underserved patients. Students in the P1 class year perceived skilfulness in caring for the underserved was higher than students in the P4 class year.

REFERENCES AND/OR ACKNOWLEDGEMENTS

1. Buck DS, Monteiro FM, Kneuper S, et al. Design and validation of the Health Professionals' Attitudes Toward the Homeless Inventory (HPATHI). *BMC Med Educ.* 2005; 5 (1):2. (2) Lupu AM, Connor SE, Jonkman L. Pharmacy students' actual and perceived knowledge related to underserved populations across the professional curriculum. *Currents in Pharmacy Teaching and Learning* 2013; 5(6): 526-540.

Conflict of Interest No conflict of interest.

6ER-029 EYE DROPS OF INTERFERON ALPHA-2B TO TREAT OCULAR PATHOLOGIES

¹M Serrano*, ²E López-Aspiroz, ¹E García-Martín, ¹JP Barro-Ordovas, ¹A Martínez-Hernández. ¹Hospital Universitario Infanta Sofía, Pharmacy, San Sebastian de Los Reyes, Spain; ²Hospital Universitario la Princesa, Pharmacy, Madrid, Spain

10.1136/ejhpharm-2023-eahp.351

Background and Importance Interferon alpha-2b is an option of treatment in malignant ocular pathologies such as ocular squamous surface neoplasia (OSSN) but its use is less extended to benign diseases like pterygium. In our country we had available Intron® to made eye drops until 2021 June, but its production was discontinued and another drug (Bioferon®) with few data of safety in ocular administration was imported.

Aim and Objectives To evaluate the efficacy and safety of two different drugs (Intron® and Bioferon®) in the treatment of ophthalmic pathologies.

Material and Methods All patients who underwent treatment with eye drops of interferon alpha-2b in our hospital from April of 2009 until August of 2022 were selected. We registered age, type of pathology, time of treatment, adverse events, recurrences and response (partial, complete or surgery immediately after or before treatment).

A literature search was done to make the eye drops from Bioferon® and finally we used water for injection to reconstitute the vial and balanced saline solution to complete 10 mL of volume (concentration of 10 mg/mL).

Results Thirty-six patients received 38 treatments (two patients had both eyes affected). By type of pathology, 24 were pterygium, 8 OSSN, 2 papilloma, 1 epidermoid carcinoma and 1 clear cell carcinoma. From the total of patients with pterygium, 54% received surgery, 21% had partial response and 25% had no response; four patients with malignant pathology (OSSN and carcinomas) had complete response, 2 had partial responses and 4 were operated. All patients with papilloma underwent surgery.

On groups of malignant pathology and papilloma 1 patient had recurrence at each one. Evaluation of recurrences in pterygium group was hard due to lack of follow up after

surgery, but with the data available 70% of them had no recurrences.

Only one of all patients had an adverse event (ocular irritation).

Two patients received Bioferon[®], both with OSSN. One had complete response and the other partial response with no adverse effects.

Conclusion and Relevance We can conclude that eye drops of interferón alfa-2b are safe and effective to treat malignant pathologies and the formulation with the new drug Bioferon seems to maintain safety and efficacy, but we need more patients to confirm it.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest.

6ER-031 KNOWLEDGE ABOUT HUMAN IMMUNODEFICIENCY VIRUS (HIV) TRANSMISSION IN PEOPLE LIVING WITH HIV IN ANTIRETROVIRAL THERAPY

¹Á López García*, ¹L Martín-Zaragoza, ¹L Rubio-Ruiz, ²C Martínez-Nieto, ³M Velez-Díaz-Pallares, ⁴P Sanmartín-Fenollera, ⁵JA Peña-Pedrosa, ¹A Onteniente-González, ⁶LM Bedoya-del-Olmo, ⁶I Iglesias-Peinado, ¹J Sánchez-Rubio-Ferrández. ¹Hospital Universitario de Getafe, Pharmacy Service, Getafe, Spain; ²Hospital Universitario de la Princesa, Pharmacy Service, Madrid, Spain; ³Hospital Universitario Ramon Y Cajal, Pharmacy Service, Madrid, Spain; ⁴Hospital Universitario Fundación Alcorcón, Pharmacy Service, Alcorcón, Spain; ⁵Hospital Clínico San Carlos, Pharmacy Service, Madrid, Spain; ⁶Universidad Complutense de Madrid, Pharmacy Faculty, Madrid, Spain

10.1136/ejhp-2023-eahp.352

Background and Importance Human Immunodeficiency Virus (HIV) infection is nowadays chronic due to antiretroviral therapy (ART).

Knowledge about HIV transmission (KHIVT) empowers people living with HIV (PLWHIV) to engage in ART.

Aim and Objectives To describe KHIVT among PLWHIV on ART and to identify factors associated with lower access to this information.

Material and Methods Multicentre (5 centres), observational, prospective and cross-sectional study. We included adult PLWHIV on ART with >3 months since diagnosis.

KHIVT was evaluated using an *ad hoc* questionnaire of 20 statements, to be replied 'true' or 'false'. Results are the percentages of correct answers, considering as optimal knowledge results $\geq 80\%$.

Factors collected were sexual orientation, gender identity, racialisation, religion, social support, educational level, relationship and economic status, social visibility, drug use, and involvement in sex work.

Associations between quantitative and qualitative variables were analysed with Student's T test or Mann-Whitney U test based on normality tests. Spearman correlation coefficient (r) was used between quantitative variables.

P-values <5% were considered statistically significant.

Results We enrolled 169 participants, aged 20-81 years old ($\bar{x}=46.6 \pm 12.2$); 147 men, 19 women, and 3 non-binary people.

KHIVT obtained an average result of $87.2 \pm 10.4\%$. 77.52% of participants had optimal knowledge.

Three of the four statements with the worst results were that related to HIV untransmissibility in PLWHIV with undetectable viral load (U=U).

STATEMENT	PARTICIPANTS THAT ANSWERED CORRECTLY (%)
ART could allow unprotected sex without risk of transmission (TRUE)	38.46%
There is no risk of transmission when the viral load is undetectable (TRUE)	64.50%
HIV can be transmitted through infected bodily fluids (TRUE)	72.78%
Children of HIV+ pregnant persons will always be HIV+ (FALSE)	75.15%

Women achieved worse results than men ($\Delta\bar{x}=8.16$ | CI95%:3.3-13.0 | $p=0.001$).

Heterosexual men achieved worse results than homosexual men ($\Delta\bar{x}=6.1$ | CI95%:2.7-9.5 | $p=0.001$). There were no significant differences between bisexual men and other men.

PLWHIV with no/only primary education obtained worse results ($\Delta\bar{x}=7.5$ | CI95%:3.2-11.8 | $p=0.000$).

PLWHIV with an income <1,000€/month (gross) obtained worse results ($\Delta\bar{x}=3.7$ | CI95%:0.5-6.8 | $p=0.015$).

Age was inversely correlated with KHIVT ($r=-0.367$ | $p=0.000$).

Conclusion and Relevance About a quarter of PLWHIV have sub-optimal KHIVT. Furthermore, the premise U=U is not yet sufficiently widespread.

Women, heterosexual men, older people, people with low education level and those with a limited economical income have greater difficulty accessing this information.

REFERENCES AND/OR ACKNOWLEDGEMENTS

Conflict of Interest No conflict of interest

6ER-032 HOW CAN DUTCH UNIVERSITY HOSPITALS CONTRIBUTE TO AFFORDABLE MEDICINES AND COST CONTAINMENT OF TOTAL HOSPITAL DRUG EXPENDITURE: A DELPHI STUDY

¹A Dane*, ²A Ramlal, ³M Overgaag-van Hemert, ¹P Roos, ⁴C Post, ⁵C Uyl-de Groot, ¹H Van Der Kuy. ¹Erasmus Mc, Hospital Pharmacy, Rotterdam, The Netherlands; ²No Affiliation, N/A, Den Haag, The Netherlands; ³NZA, N/A, Utrecht, The Netherlands; ⁴Amsterdam Umc- Locatie University of Amsterdam, Oncology, Amsterdam, The Netherlands; ⁵Erasmus University Rotterdam, Erasmus School of Health Policy and Management, Rotterdam, The Netherlands

10.1136/ejhp-2023-eahp.353

Background and Importance Increasing expenditure on pharmaceuticals is of growing concern to the affordability of health-care systems across Europe. As stated in the European Commission (EC)'s Pharmaceutical Strategy for Europe all stakeholders should be involved in tackling this problem. The EC has indicated that solutions along the entire drug life cycle (DLC) should be considered as it offers a more comprehensive and integrated view to address this topic. Being a stakeholder, university hospitals (UH) are engaged in multiple phases of the DLC, consisting of (pre-)clinical research, market authorisation, pricing and reimbursement, manufacturing, procurement, prescribing, dispensing and monitoring real-world effectiveness.