bone marrow toxicity are needed as a few reports are available.

REFERENCES

Conflict of Interest No conflict of interest

ANALYSIS OF EFFECTIVENESS AND COSTS OF DRUG THERAPY PRESCRIBED IN SPECIAL SITUATIONS IN OUR HOSPITAL

MM Parera Pascual*, LFérez De Amezaga Tomás, B Calderón Hernanz, A Brady García, MA Crespi Cifre, M Caballero Sanchez, M Vilanova Boltó. Hospital Son Llàtzer, Pharmacy, Palma De Mallorca, Spain

Background and Importance A marketing authorisation is a general rule in the legal framework of medicines. However, EU legislation does not regulate how drugs are ultimately used in medical practice.

The Royal Decree 86/2015 regulates the Pharmacy and Therapeutics Committee of the Balearic Islands. This P&T-Committee is an advisory panel of experts, composed by pharmacists and physicians, which elaborate technical reports to allow or deny drugs prescribed in special situations: off-label drugs(OLDs), compassionate drugs(CDs) and drugs not included in the hospital’s pharmacotherapeutic guide(HTTPG). Aim and Objectives To analyse the clinical response achieved by the treatments approved by P&T-Committee and their associated costs.

Material and Methods Prospective study of the drugs requested to the P&T-Committee between January/20-December/21.

A Microsoft-Access® database was created for collecting the variables: type of treatment (OLD,CD or not included in the HPG), level of evidence, clinical response, adverse effects and costs. Clinical response was defined as success or failure based on the therapeutic objective established by the physician at the time of the request. The cost was calculated based on the duration of the treatment until the objective was achieved or until treatment was discontinued.

The data were obtained from patients’ electronic medical records(HP-HCIS®).

Results In total, 182 requests were approved: 30.8% successes, 29.7% failures, 6.6% interrupted because of adverse effects, 8.7% not initiated and in 24.2% insufficient time had passed for them to make a valid assessment of the real effectiveness.

Almost half of the treatments(44.5%) were considered to have a high level of evidence. In reference to the type of treatment: 57.5% were OLDs, 35.5% were drugs not included in the HPG and 7% were CDs. Oncology and Haematology have a high level of evidence. In reference to the type of treatment follow-up plans.

In total, 182 requests were approved: 30.8% successes, 29.7% failures, 6.6% interrupted because of adverse effects, 8.7% not initiated and in 24.2% insufficient time had passed for them to make a valid assessment of the real effectiveness.

Almost half of the treatments(44.5%) were considered to have a high level of evidence. In reference to the type of treatment: 57.5% were OLDs, 35.5% were drugs not included in the HPG and 7% were CDs. Oncology and Haematology have a high level of evidence. In reference to the type of treatment follow-up plans.

Conclusion and Relevance The percentage of treatments analysed that achieved their therapeutic goal was very similar to those that didn’t, probably because of the high level of heterogeneity of the treatments analysed. However, we can’t ignore the high economic impact of these drugs and we need to define therapy follow-up plans.

REFERENCES AND/OR ACKNOWLEDGEMENTS
Conflict of Interest No conflict of interest

ESTIMATING RENAL FUNCTION FOR DRUG DOSING: CORRELATION BETWEEN CKD-EPI AND COCKCROFT-GAULT IN AN ELDERLY POPULATION

IV Rodrigues*, IT Rodrigues, A Martins, ICoudinho, DO Palma. Hospital De Cascais, Pharmacy, Cascais, Portugal; Faculdade De Farmácia Da Universidade De Lisboa, Student, Lisbon, Portugal

Background and Importance Estimates of glomerular filtration rate (eGFR) should provide accurate measure of an individual’s kidney function. This is even more important in old people since there is age-related physiological change in the kidney, which could lead to reduced GFR. The overestimation of GFR may lead to drug toxicity and the underestimation may lead to sub-therapeutic drug levels.

Use of multiple equations to evaluate renal function can lead to differences and corresponding drug dosing regimens. The Cockcroft-Gault (CG) equation, despite inaccurate in the elderly, remains the most widely used equation for determining the creatinine clearance (CrCl). On the other hand, estimation of GFR using the CKD-EPI has gained increasing acceptance. This formula is used to classify chronic kidney disease.

Aim and Objectives To determine the correlation between estimated CrCl by CG with eGFR by CKD-EPI. Additionally, we have compared the differences among dose adjustments recommendations and evaluated the patient’s profile in the most discrepant results.

Material and Methods The study included hospitalised patients in the Medicine ward aged 70 and above with prescriptions of enoxaparin, meropenem, amoxicillin + clavulanate and piperacillin + tazobactam. Demographic data and serum creatinine (S creatinine) were collected. CrCl was calculated using CG equation and eGFR by CKD-EPI 2021 equation.

Results

Abstract 4CPS-159 Figure 1

Conclusion and Relevance In only four patients did difference in the estimation of renal function using the two equations, leading to different drug dosing recommendation. One patient had both enoxaparin and meropenem prescribed, all others only one drug. It seems that it is safe to use the CKD-EPI equation to drug dosing, with caution in patients with extreme weight and age characteristics. Future studies should...