and 'drug', allowed us to estimate, for each AE the most likely responsible ICI drug. The metrics of the ML model obtained were satisfactory and compatible with the RM analysis. The J48 algorithm produced a complex tree (to be expected given the large number of AE). The application of J48 on another subset that includes 'adverse effect', 'age' and 'drug', had a lower predictive capacity, due to the lower consistency of the data (age is only recorded as younger or older than 65 years) and that there is a higher proportion of missing values. The RM allows the results obtained with ML to be easily explained and understood.

Conclusion and Relevance The results of the J48 algorithm were useful for the association between AE, sex and drug. Despite the inherent limitations of voluntary AE reporting, this study will serve as a starting point for applying ML techniques in any other group, using FAERS data.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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Conflict of Interest No conflict of interest.

5PSQ-098 ABSTRACT WITHDRAWN

5PSQ-099 DRUG-RELATED PROBLEMS ASSOCIATED WITH THE TREATMENT OF POLYCYSTIC OVARY SYNDROME

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Background and Importance Polycystic ovary syndrome (PCOS) is a severe public health problem and a major determinant of various reproductive, metabolic, and psychological outcomes. The pharmacological management of PCOS is complex and should be individualised based on the multifactorial manifestation of the disease in the individual patient and her reproductive desires.

Aim and Objectives To identify the most common drug-related problems (DRPs) by reviewing and analysing data from the scientific literature and PCOS treatment guidelines.

Material and Methods A review of international scientific databases, projects, initiatives to improve the therapeutic management of PCOS and normative regulations in the field of pharmaceutical practice was carried out. Both comparative and critical content analysis of therapeutic guidelines and good practice initiatives for the treatment of PCOS, as well as general research methods (historical, internet reference and content review, theoretical deductive analysis method) were used.

Results DRPs related to the lack of sufficient efficacy data to support drug use, as well as inadequate therapy selection to address the complex phenotype of PCOS, and DRPs related to safety and tolerability concerns (mainly associated with metformin and letrozole treatment) are among the main issues identified. The safety profile of oral contraceptives as the primary therapeutic approach for PCOS treatment is also a source of DRPs. The possibility that the choice of therapeutic approach may not be tailored to specific patient characteristics, usually through the selection of subeffective doses and dosage forms, remains a critical concern in the context of PCOS pharmacotherapy. Drug misuse, off-label prescribing or prescribing of repurposed drugs, and DRP due to the long duration of therapy required are other major group of concerns related to the management of PCOS.

Conclusion and Relevance The implementation of complex pharmaceutical care interventions by hospital pharmacists tailored to the specific needs of patients with PCOS and the addressing of the identified DRPs will lead to better control