



# IMPACT OF SUPPLY PROBLEMS IN A HOSPITAL PHARMACY SERVICE

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## Background

The hospital manage of drugs is a complicated task for which it is necessary to take into account different factors such as average consumption, seasonal variations, cost, physical space available for storage and therapeutic innovations. Currently this task is hampered by the numerous supply issues (SI) that in many cases affect regular used drugs. These problems can lead to shortage and produce lack of effectiveness of treatments, compromise patient safety, and increase treatment costs.

## Purpose

Analyze no-oncohematologic SI and their impact on the management of drugs in the Pharmacy Service of a hospital.

## Material and methods

Prospective study to evaluate the SI started between June and November of 2018.

The variables collected were: start and end dates of the SI the ATC code and if the drugs are considered essential by the WHO, if they produced shortage, if the SI had alternative (same dose and same route of administration) and if the SI was registered on the official website of the Spanish Government (AEMPS) when was detected.

An economic analysis of the SI was made with all the data registered into an Excel sheet. It was evaluated whether SI caused any inconvenience to the Pharmacy Service (drug restriction, management and preparation difficulties).

## Results

There were 76 SI affecting 74 drugs. The average duration was 64 days (range 2-224). 53% of the affect drugs are considered essential by the WHO. In 29% there was a stock shortage, 60% of SI had an alternative and 47% of the SI weren't registered on the AEMPS.

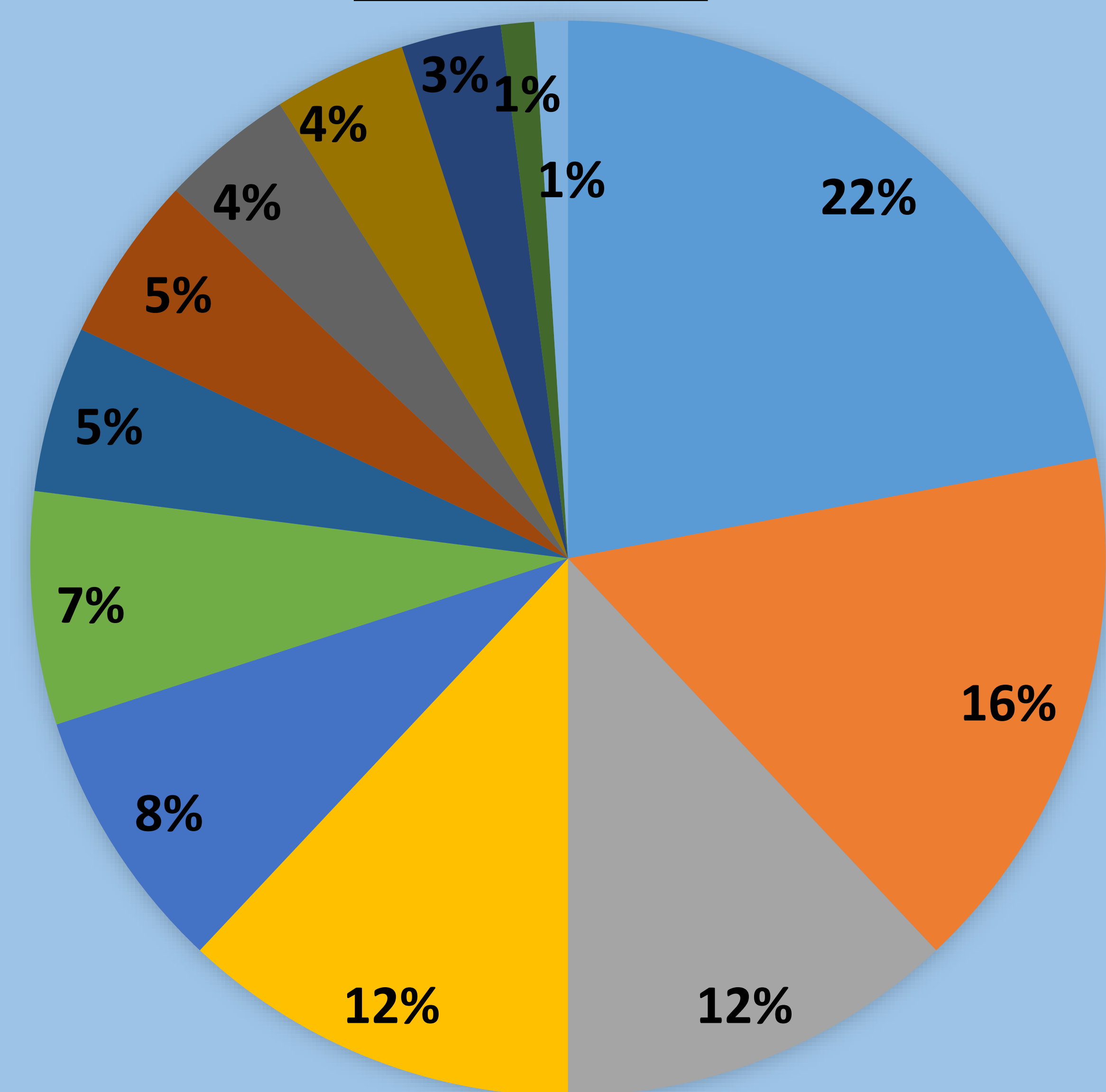
The total additional cost of supply problems was 52.054,04 €.

38% of SI had an inconvenient for the Pharmacy Service.

## Conclusion

Considering that most of supply problems are of essential drugs, these problems can compromise the quality of health care and patient safety. J group was the most affected group, that could result in an increase of antibiotic resistance if it increases the consumption of broad-spectrum antibiotics. AEMPS must improve the SI information. Shortages usually increase treatment costs.

**ATC CODE**



<https://www.eahp.eu/25-1ISG-017>