IMPLEMENTED STRATEGIES TO SOLVE MEDICINES SHORTAGES

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BACKGROUND

Medicines shortages (MS) have become a complex global issue, forcing changes in the hospital formulary and increasing the risk for medication errors. Additionally, problems related to these MS create difficulties for health care professionals and require urgent pharmacist-led action.

PURPOSE

To analyse the impact of MS in our centre and to describe the different actions performed by the Pharmacy Service (PS) to minimise risks regarding medication errors.

MATERIALS AND METHODS

Descriptive, observational and retrospective study performed in a third-level hospital regarding MS registered in our centre from January 2017-September 2018.

The following data were retrieved from the MS listed in the Spanish Agency for Medicines and Health Products (AEMPS) online platform and Farmatools® management tool:

- Affected medicine (active substances and pharmaceutical forms).
- Inclusion in hospital formulary.
- Measures implemented to solve the MS (only when included in the hospital formulary).

RESULTS

During the study period

476 medicines affected by shortage in our country

323 (67.8%) active substances included hospital formulary

138 (29.9%) same dosage and pharmaceutical form needed to be managed by the pharmacist

The strategies for the management of MS were:

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<tr>
<th>Strategy</th>
<th>Cases (%)</th>
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<td>Changing the provider or buying a different packaging</td>
<td>55 (39.9%)</td>
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<tr>
<td>Using a therapeutic alternative</td>
<td>13 (9.4%)</td>
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<td>Medicine import from other countries through AEMPS authorization was available. <em>But we only used it in 11 cases (8%) because of the need to repack each unit with a translated label and product data sheet before its distribution in the hospital.</em></td>
<td>26 (18.9%)</td>
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<td>Restricted use of available pharmacy stock, according to clinical criteria agreed with medical staff.</td>
<td>14 (10.1%)</td>
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<td>No action was needed due to infrequent use of the medicine affected and/or enough pharmacy stock available until resupply.</td>
<td>45 (30.6%)</td>
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CONCLUSIONS

A large number of medicines were affected by shortages in our centre. These MS have shown an important degree of compromise in patient care and treatments safety. Pharmacists are required to take urgent action to manage problems caused by MS, which implies greater workload due to administrative procedures, determination of therapeutic alternatives and communication with health professionals involved, so as not to compromise the continuity of treatments.

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