On March 11, 2020, the WHO announced that SARS-CoV-2 was a global pandemic. The main symptoms of COVID-19 are fever, cough, fatigue, slight dyspnoea, sore throat, headache, conjunctivitis and gastrointestinal issues. Real-time PCR is used as a diagnostic tool using nasal swab, tracheal aspirate or bronchoalveolar lavage. The off-label use of various medical products has required a substantial and sudden supply and the production of legislation to settle such handling.

The aim of the study is to analyze the supply process of off-label drugs and the reference to the legislation national for each medicinal product, regarding the consumption data and the number of patients Covid-19 treated at Covid Center in Rome, with 200 Covid hospital beds in four departments and 40 hospital beds in two ICUs.

**Period of study:** 02/2020 – 31/07/2020

The data were obtained from off label requests and specific forms according to Company procedure. Every data, including those pharmacoepidemiological, were included and extracted from excel files.

**Results**

- 10,658 tablets of Lopinavir / Ritonavir were moved on 250 patients.
- 302,150 tablets of Hydroxychloroquine on 350 patients.
- 660 tablets of Darunavir / Colbicistat on 32 patients.
- 330 tablets of Chloroquine on 33 patients.
- 88 vials of Tocilizumab on 54 patients.

**Pharmacoepidemiology**

- 80% >75 years
- 20% <75 years

**Genre patients**

- 40% F
- 60% M

**CONCLUSIONS**

The Covid-19 emergency has highlighted the key role of the pharmacist in the supply of innovative therapeutic options, in the management of the National Regulations and in the production of their request forms; to order this, it’s needed a cooperation of all actors of the process.