ROLE OF THE PHARMACIST IN THE EVALUATION OF THE PRESCRIPTIVE APPROPRIATENESS IN ANTIBIOTIC THERAPY

P. Sorice1, L. Armillei1, G. Di Florio1, F. Gasbarri1, S. Rossetti2, S. Corridoni1, A. Costantini1.
1 Hospital Santo Spirito Pescara, Hospital Pharmacy, Pescara, Italy
2 Hospital Santo Spirito Pescara, Hospital Pharmacy - Trainee, Pescara, Italy

Abstract Number: 4CPS-074
ATC code: J01 - Antibacterials for systemic use

Introduction
The importance of prescriptive appropriateness stems from the need to combine the effectiveness of care with available resources, making them accessible to all.
An inappropriate prescription, in fact, is the cause of errors that can have important consequences as well as on the health of the patient even on health care costs.
Within the prescription of antibiotics, appropriateness is also important to reduce the phenomenon of resistance.
Currently the strategies adopted to reduce errors in therapy are:
• computerized systems for prescribing and administering therapy
• preparation and distribution of unit dose drugs
• control and validation of therapy by the Clinical Pharmacist.

Our Hospital has been managing the Unit Dose system since 2005. Currently there are 18 units in doses and unit doses for 400 beds are set up.

Purpose: The aim of this study was to evaluate the pharmacist’s contribution to Risk Management to increase the appropriateness of antibiotic prescriptions and reduce costs.
All the therapies that have been modified following a pharmacist's report and, therefore, the degree of acceptance of notifications by the medical staff were examined.

Results: The analysis was carried out by extrapolating, from the prescription software, the medical prescriptions of the antibiotics for the two periods June-December 2016 and June-December 2017 and deemed not appropriate for:
✓ Posology (dosage, administration frequency, route of administration, duration of therapy ...)
✓ Therapeutic indication
✓ Pharmacological Interactions
✓ Instructions on how to dilute
✓ intolerances / allergies

In June-December 2016, 279 inappropriate therapies were reported by the Pharmacist. Of these, 19% (53) were modified by the doctor.
In the period June-December 2017, 430 reports were introduced, of which 26.51% (114) were modified by the doctor.
The result of the analysis carried out confirms an increase in appropriateness of 7.51%.
In the two periods compared, there was an increase in reports that also produced an economic saving of € 33,619.12.

Conclusions: The analysis shows that the role of the Pharmacist is fundamental both to ensure the effectiveness and efficiency of the therapies and to contain the costs of pharmaceuticals and health in general.