TELEPHARMACY PROGRAMME IMPLEMENTATION DURING THE COVID-19 PANDEMIC

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BACKGROUND AND IMPORTANCE
The Covid-19 pandemic has created a new scenario for the dispensing of hospital drugs. Hospital Pharmacy Services had to implement a Telepharmacy program in a record time, in order to bring drugs closer to patients.

AIM AND OBJECTIVES
To measure the impact of a Telepharmacy program in terms of direct and indirect costs and benefits for patients.

MATERIAL AND METHODS
Retrospective observational study in a tertiary level Hospital, between March and September 2020. The following variables were collected:
* number of remote dispensings,
*number of patients enrolled in the Telepharmacy program,
*population characteristics,
*drugs and storage conditions,
*average distance,
*direct and indirect costs.

RESULTS
A total of 13,216 remote dispensing were made related to 4,090 active patient within the Telepharmacy program

51,21% of the total number of our outpatients
50,81% (2,078) were women
Median age was 57 (±23) years

The mean distance of the shipments was 41.7 (0,2-208) km

44,59% (5,894) of the total drugs sent were thermolabile drugs

Establishing the ratio € 0,226/km and 1 visit/2 month to the Hospital Pharmacy Service
direct cost would mean an average of €113,04/year each patient

Establishing the 1 km/ 2 min relationship, the annual indirect costs represent 10.5 working hours

7.7 hours as the average travel time
2.8 hours as the average waiting time for face-to-face dispensing

CONCLUSION AND RELEVANCE
Telepharmacy has become one more tool for dispensing treatments to outpatients; assuming savings for the patients in travel and waiting times.
The time of confinement due to the pandemic has accelerated the inclusion of patients in this program, reaching more than 50% in 6 month.

No conflict of interest