



## EVALUATION OF OSELTAMIVIR USE IN CLINICAL PRACTICE IN A SECOND LEVEL HOSPITAL.

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### BACKGROUND

- A new protocol was up-dated last year in our hospital specifying renal impairment posology adjustment criteria; and the cases in which the use of oseltamivir during 7-10 days is justified

### PURPOSE

- Evaluate the suitability of oseltamivir prescription based on the 2018 up-dated protocol
- Evaluate the pharmacist interventions related to oseltamivir prescriptions
- Analyse the simultaneous prescription of antibiotics in patient with influenza A.

### METHODS

- Observational retrospective study during the period 31 December'18 -28 February'19
- Adult patients with Influenza A confirmed infection, treated with oseltamivir. Paediatric patients and those hospitalized in ICU were excluded.
- Variables registered: Demographic variables, unit of prescription, glomerular filtration rate (GFR calculated by CDK-EPI), dosage, treatment duration and reasons to lengthen the oseltamivir treatment. Moreover pharmaceutical recommendations related to prescription, concomitant use of antibiotics and results of microbiological culture were gathered.

### RESULTS



n= 255



176 (68.12%)



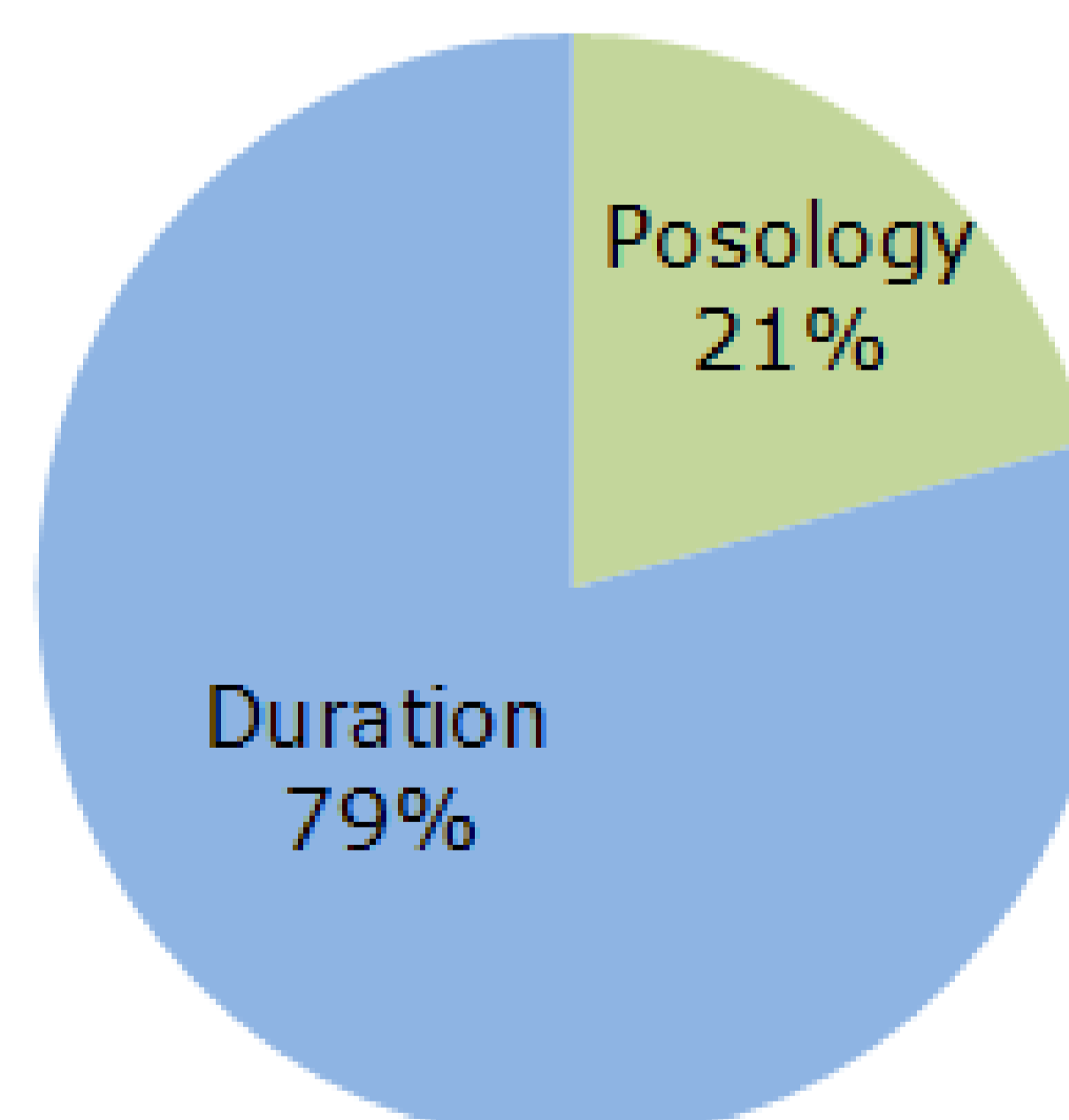
132 (52.36%)



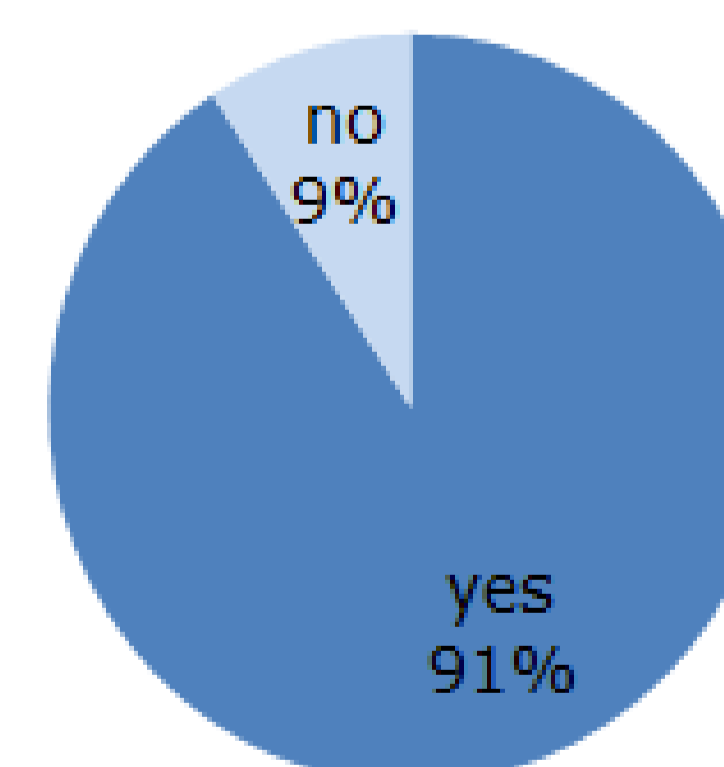
119 (46.9%) had prescribed also an antibiotic of whom 31 was isolated a microorganism.

Variable	Nº cases (%)
Unit of prescription	Surgical: 16 (6.3) Medical: 239 (93.7)
Posology not suitable to renal impairment	17 (6.7)
Oseltamivir > 5 days not justified	42 (16.5) 36 (14.1)

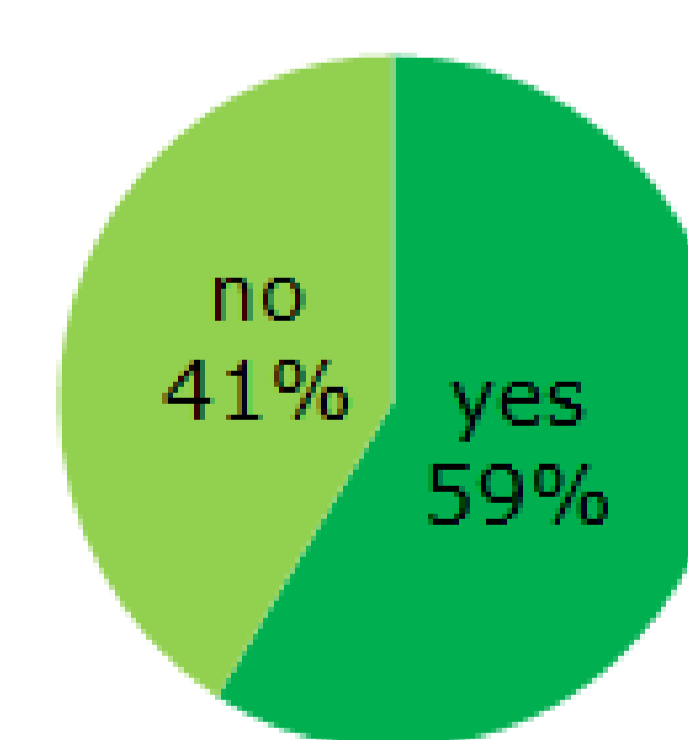
Pharmaceutical interventions



Acceptance (duration)



Acceptance (posology)



### CONCLUSION

The degree of compliance with the oseltamivir hospital protocol up-dated in 2018 was higher than 80%. In global, more than 90% of the pharmaceutical interventions resulted were accepted resulting in a change in the medical prescription according to the protocol recommendations. The pharmaceutical validation adds safety to the hospitalized patients and optimised oseltamivir prescription.