**USEFULNESS OF PHARMACEUTICAL VALIDATION IN CHEMOTHERAPY PRESCRIPTIONS**

Sánchez Argáiz MC, Sierra Torres MI, Gándara Ladrón de Guevara MJ, Espinosa Rodríguez A, Jiménez Morales A. Hospital Universitario Virgen de las Nieves (Granada)

**Background and Importance**

One of the most frequent complications of antineoplastic treatment is the drugs toxicity, which can lead to temporary or definitive treatment interruptions, dose reduction, prescription of support drugs and even visits to the doctor and hospital admissions. Pharmaceutical validation aims to optimize chemotherapy treatment in order to obtain the best results for patients’ health.

**Aim and Objectives**

To describe the pharmaceutical interventions made in the oncohaematology area during the validation of intravenous cytostatic preparations that led to a change in prescribing.

**Material and Methods**

Observational, descriptive and retrospective study

Pharmaceutical interventions carried out in intravenous chemotherapy prescriptions in oncohaematological day hospital were analyzed between November 2020 to September 2021.

Interventions were classified into 9 groups:

1) Upper/lower dose <10%
2) Upper/lower dose >10%
3) Inappropriate cycle frequency
4) Relevant interaction or adverse effect
5) Dose adjustment (renal and hepatic impairment, toxicity)
6) Incorrect protocol
7) Missing drug
8) Excess drug
9) Others

**Results**

1554 outpatients received chemotherapy treatment (67% oncological and 33% haematological)

124 chemotherapy prescriptions of 101 patients were changed due to medication errors detected during pharmaceutical validation.

<table>
<thead>
<tr>
<th>Changes in chemotherapy prescriptions after pharmaceutical interventions</th>
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<tr>
<td>Drug dose reduction</td>
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<tr>
<td>Inadequate chemotherapy cycle frequency</td>
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<tr>
<td>Temporary treatment suspension, dose adjustment and/or supportive medication due to drugs toxicity or renal/hepatic impairment</td>
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<tr>
<td>Wrong chemotherapy protocol</td>
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<tr>
<td>Lack or excess of any medication</td>
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<tr>
<td>Other reason</td>
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**Conclusion and Relevance**

Despite the number of pharmaceutical-interventions does not represent a large volume in the total number of patients treated, they led to a probable reduction in adverse drug events, toxicities and patients overdose. This gives us an idea of the benefit of having a pharmacist as part of the multidisciplinary team in oncohaematology and the importance of pharmaceutical validation in the chemotherapy treatment optimization and patient safety.