1 Background
Treatment with inhaled colistin (IC) in our health area has increased in recent years; requiring learning and retention by the patient.

Purpose
To relate the adherence to treatment with IC with the efficacy in patients with non-cystic fibrosis bronchiectasis colonized with Pseudomonas aeruginosa (PA).

2 MATERIAL AND METHOD
Retrospective observational study in a university hospital between January 2010 and January 2014. We selected those patients who started treatment with IC during this period including those of whom we could monitor by obtaining data from the I-neb inhalation device. The information obtained was: average duration of the complete treatments, management of the device and the adherence of each patient for the first 3 months of continuous treatment. We obtained the demographic, diagnostic and microbiological data of each patient, considering in each case whether it was initial colonization, intermittent or chronic.

3 RESULTS
- Of 44 patients treated with IC, 19 of them met the study inclusion conditions as they could be monitored when visiting the Pharmacy Service with the I-neb device.
- The average age was 69.4 years (SD: 17.4).
- 52.6% were women.

The data from the inhalation device were:
- An average duration of complete treatments of 6.1 minutes (SD: 3.8).
- A proper handling of the device of 95.5%.
- An adherence to treatment of 93.9%.

After completion of the treatment, which lasted 3.5 months (SD: 2.2), cultures became negative in 9 patients (42.1%).

4 CONCLUSIONS
Most of our patients were adherent to the treatment (73.7%) which suggests that the I-neb was easy to use.

The role of the pharmacist is relevant because in the few cases where the average length of complete treatments was higher or adherence was low, the importance of these concepts was reinforced during the monthly clinical interview.