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ABSTRACT BOOK

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than in the pivotal study because the study was not long enough to achieve better results. On the other hand, PFS was higher than in the pivotal study which was 2.0 months. Adverse effects confirmed haematologic toxicity.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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No conflict of interest

DI-065

WHAT ARE THE OPINIONS OF THE PUBLIC IN WALES ON HOSPITAL PHARMACISTS HAVING ACCESS TO THEIR HOSPITAL DISCHARGE ADVICE LETTERS?

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Background The involvement of a multidisciplinary team in the management of a patient's transfer from hospital to hospital has been shown to improve patient outcomes and reduce readmissions. Hospital pharmacy discharge medicines review aims to improve patient compliance and comprehension. NHS Wales Informatics Service (NWIS) are considering whether hospital pharmacists should be sent a copy of the discharge advice letter (DAL).

Purpose The study aimed to evaluate and quantify the views of the public on hospital pharmacist's access to the patients' DAL.

Material and methods A pre-piloted questionnaire was sent to a total of 4000 participants across the whole of Wales. The participants' agreement was sought using a Likert scale, to share information related to hospital admission details, hospital discharge details, clinical information, medication information and recommendations. Sampling clusters were identified based on population size, and then categories were purposively assigned to local authorities to obtain a representative sample of the whole of Wales. Random sampling using Excel was used to select participants from the edited electoral roll. Quantitative data were analysed by SPSS 20 and qualitative free text comments were analysed via inductive thematic analysis.

Results 12.5% questionnaires were returned. The majority of respondents either agreed or strongly agreed to all types of hospital discharge information being shared with the hospital pharmacist to increase patient safety; 30% preferred this information to be shared electronically. Almost half of the public (49.7%) felt that consent should explicitly be provided for every hospital discharge. Five broad themes were identified, each containing a number of sub-themes. These included personal details, relationship with hospital pharmacy, sharing information with a hospital pharmacy, patient consent and opinions of hospital pharmacists having access to hospital discharge information. The study revealed a low usage of pharmacy services and further education about the role of the pharmacist should help to integrate the services with that of other health professionals.

Conclusion The results will be fed back to NWIS for review in the hope hospital pharmacists will gain access to DALs

which would be expected to improve patient care and potentially save costs.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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DI-066

HERBAL MEDICINES IN CHILDREN: BETWEEN ADVICE GIVING AND SELF-MEDICATION

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Background Herbal medicines (HM) are those with active ingredients made from plant parts, such as leaves, roots or flowers. However, being 'natural' does not necessarily mean they are safe to take.¹ Taking HMs may not be suitable for children: as for all medicines. The NHS recommends that parents ask a paediatrician or pharmacist before giving a HM to their children.¹

Purpose To investigate HM use in the paediatric population (0–18 years).

Material and methods We conducted a prospective study, using a questionnaire delivered to parents waiting in a paediatric practice office. Questions concerned: most used HMs, general opinion about HMs and practical experience (as to their efficacy and side effects).

Results 92 questionnaires have been collected to date. 90.2% of those interviewed were mothers. 78.3% affirmed the use of HMs for their children. HMs were mostly used for cough and cold syndromes. 76.9% of mothers bought HMs less than 5 times a year. HMs were mostly suggested by the paediatrician (49.2%) or pharmacist (47.7%), and less frequently by the seller in the herbalist's shop (10.8%) or by the natural health practitioner (6.2%). 63.6% considered HMs use as an alternative medicine, 50.6% as effective as conventional medicine and 44.4% affirmed that the efficacy HMs depends on the product. 83.8% considered HMs less dangerous than conventional drugs. 84% of parents said that children did not develop side effects after HM administration. The majority of parents reported HM use to the doctor in the case of drug prescription (45.1%); 68.4% were aware of interactions of HMs with other substances.

Conclusion Even if this subject is relevant and our data show that HMs are frequently used in children, overall information are lacking in the literature. Hence one of our purposes would be to implement our study, extending it to a more widespread population.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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No conflict of interest