5PSQ-147 THE VALSARTAN SAGA: PHARMACISTS' COMPETENCE TO RESOLVE THE THERAPEUTIC CHALLENGE

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Background A safety alert by the European Medicines Agency notified that some valsartan products were contaminated with the genotoxic impurity, N-nitrosodimethylamine (NDMA). This triggered a voluntary recall of potentially impacted valsartan medicines.
Purpose To investigate the competence of the pharmacist in assessing and addressing the risk-benefit associated with the safety concern of NDMA in valsartan medicines.
Material and methods A symposium was organised to evaluate the competence of the pharmacists in the application of scientific knowledge to the therapeutic challenges in the valsartan saga. A 32-slide presentation and nine questions were prepared and presented to the pharmacists (n=26, 16 females, 10 males; age 22 to 45; 10 hospital, 12 community, four industrial pharmacists) The responses given in the interactive discussion were recorded interactively by the Mentimeter and the results were related to the competence through an arbitrary evaluation.
Results Eighteen pharmacists (68%) stated that NDMA is a probable human carcinogen found to cause cancer in animals. Twenty-two (84%) stated that not all sartans contain a tetrazole ring and 20 (77%) responded that the formation of NDMA occured during the synthesis of valsartan. Twenty (77%) stated that NDMA is unlikely to bioaccumulate and seven (27%) stated that the half-life of valsartan is 6 hours. Six pharmacists (24%) correctly stated that 1.5 mcg/day was the tolerated limit for daily exposure to NDMA and 24 (88%) stated that drinking water, ham, bacon and cigarettes were contaminated with NDMA. Twenty (77%) pharmacists advised that valsartan should not be stopped abruptly until alternative treatment was available and 24 (92%) stated that they would recommend switching patients to another sartan as early as possible.
Conclusion The findings show that pharmacists have the necessary competence to deal with the valsartan saga. However, the symposium shows that pharmacists can benefit from an added value to their scientific knowledge such as in the pharmacokinetics and the clinical relevance of angiotensin-receptor antagonists and the threshold for toxicological concern of NDMA impurites.

REFERENCES AND/OR ACKNOWLEDGEMENTS

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No conflict of interest.

5PSQ-148 PHARMACOVIGILANCE AND CLINICAL PHARMACY APPLIED TO MEDICAL DEVICES: SHOULD CANCER PATIENTS BE INFORMED ABOUT THEIR MEDICAL DEVICES?

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Background At our university hospital, the number of cancer patients treated by injectable chemotherapic drugs is increasing. Currently, patients need to be increasingly integrated in their own care and participate in the reporting of adverse reactions. Admittedly, under-reporting of adverse reactions related to medical devices remains a major barrier to evaluate materiovigilance in our institution. As a result, it seems important to regularly provide patients with information on their medical devices used for the administration of injectable chemotherapeutics (MD-Chemo).
Purpose To evaluate the interest in informing patients about MD-Chemo by means of a knowledge assessment questionnaire, and to explain how this can help to promote spontaneous reporting on materiovigilance by cancer patients.
Material and methods This is an observational study of 2 months, carried out at the Functional Unit of Management of Products with Particular Status (UFGPSP) of our pharmacy department during dispensing of chemotherapic drugs to cancer patients by means a questionnaire including nine topics.
Results We were able to carry out 111 interviews wherein interviewed patients showed a low level of knowledge on most of the items discussed. Seven patients did not know the medical devices they were using, and 84 had implantable ports. Among MD-Chemo carriers, 106 patients (95.5%) wished to benefit from additional information concerning their route of administration. Sixty-three patients did not know if there were precautions to take with their medical device, while 105 (94.7%) did not know the signs of a device-related infection. Adverse medical devices' reactions reports issued by cancer patients were non-existent. This situation made it possible to target the missing information that led to the under-reporting.
Conclusion Currently, a series of participatory pharmaceutical interviews are conducted to ensure the best sharing information necessary to ensure compliance and, above all, a good quality of life. In addition, recent integration of adverse reaction reporting into the day-to-day activities of UFGPSP pharmacists, is a good way to increase the number of submitted reports.

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5PSQ-149 SELF-MEDICATION IN CANCER PATIENTS: SURVEY CONDUCTED IN THE PHARMACY DEPARTMENT OF A UNIVERSITY HOSPITAL

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Background The use of self-medication in cancer patients in combination with conventional treatments has increased in recent years. Easy access to information makes it a common practice. In our country, cancer is the second leading cause of death after cardiovascular diseases. In this context, self-medication is a poorly documented practice. It is not without potential consequences.
Purpose To have a preliminary idea of the prevalence of self-medication in our cancer patients undergoing treatment.
Material and methods This was an observational prospective study conducted in December 2017 at the Functional Unit for Management of Products with Special Status (UFGPSP) of our