productivity, and generational accounting, which accounts for a range of other gov-
ernment fiscal transfers to citizens. The possible produced value for a life-time term
was assumed as calculating the total NPV depending on the life expectancy. CPD was
assumed as the difference between NPV on the year of life expectancy and each
decades as life years 50, 40, 30, 20, 10 and new born. The economic values for the
model were determined from The World Bank, OECD or WHO. RESULTS: Possible
produced value for a life-time term for Turkey was calculated as US$ 483.298. Cost
10, 20, 30, 40 and 50 respectively. CONCLUSIONS: However the study was based
on a hypothetical model that calculated the NPV with the taxes and spending in a
life-time term, cost of premature death was calculated as the highest in early ages
on a hypothetical model that calculated the NPV with the taxes and spending in a
life-time term, the results of each country were parallel. The trend was same for Brazil
and Mexico. CPD per person for Argentina were calculated as US$ -666.234, US$ -657.861, US$
-100 prescriptions (543 medicines), 41% of prescriptions have potential DDI’s. Mostly
important DDI’s. The potential drug-drug interactions were categorized according
to severity level accounting as major (20.10%), moderate (63.4%) and minor (15.90). The mechanism by which the drugs
interact with one another showed that there were pharmacokinetic (60.5%), pharma-
codynamic (38.6%) and few of them interact by the mechanism which was newly
found in the available literature (0.9%). CONCLUSIONS: Drug-drug interactions occur
in poly-medications and need to be evaluated and monitored for the positive impact
on the medication use system and improvement of quality of patient care. A clini-
ical pharmacist with its accurate knowledge of drug, their effect on human organs and
their interaction with other can monitor and manage these drug interactions.

PHD12
EXPOSURE TO POTENTIAL DRUG-DRUG INTERACTIONS IN TEACHING HOSPITAL OF SOUTH PUNJAB, PAKISTAN
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OBJECTIVES: Drug-drug interaction is a common error in poly-medication and con-
tributes a major part in adverse drug reactions. The aim of the present study was to
evaluate the percentage of potential drug-drug interactions in the prescription in the
region of South Punjab Pakistan prescribed by the medical practitioner. METHODS: A
total of 1000 prescriptions included in the study. The new module was added to the
current BCMA system with VB. net. The functions of this computer system include seven steps.
RESULTS: A systematic review of literature on the application of the new, computerized “high-
alert/ high risk medications reminder system” was done to MICU nurses (N=36). The survey
response rate was 100%. The results showed high rate of positive support on the new system and is still needed before a final con-
clusion can be established. In addition, we are also keen to investigate whether this system
could reduce the waste of time, expenditure, and manpower in a medical center in our future study.

PHD18
COST-EFFECTIVENESS OF TELEMEDICINE: LESSONS TO LEARN FROM AN INTERNATIONAL REVIEW
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OBJECTIVES: At the global level the large deployment of telemedicine raises needs for
cost-effectiveness evaluations. The objective of this literature review is to explore
to what extend telemedicine innovations that were implemented in many countries were
effective to improve care. Specifically this literature review will examine whether the
cost-effectiveness can be adapted to the evaluation of telemedicine technologies. So,
what answers can a review of the international literature relating to the med-
ico-economic evaluation of telemedicine provide? Methods: A systematic searching of
medical databases and grey literature was performed. Result: A total of 286 articles published between 2000 and 2013, 74 studies that imple-
mented economic evaluation of telemedicine are analysed. Three axes of analysis are
selected: the act concerned by the telemedicine intervention, the medical significance
and the impact on the medication use system and improvement of quality of patient care.
CONCLUSIONS: This literature review did not allow proposing a classification
for telemedicine practices identified as efficient, depending on the strategies
compared, field of application or specialty, type of telemedicine or an organisation
of care model. Despite all this, one focus lie can be the management of chronic diseases
that remains a central topic at the international level. The increase in the number of
medical specialties or fields of application concerned with telemedicine and the
increased volume of activity necessitate the dissemination of methodological recommenda-
tions to promote the coherent development of economic evaluations. Our literature
review shows that there is need to develop innovative methods to assess the
cost-effectiveness of telemedicine technologies.

PHD19
ASSESSMENT OF VALIDITY OF AN INDICATOR MODULE IN IDENTIFICATION OF ADVERSE DRUG EVENTS IN PATIENTS OF MEDICINE DEPARTMENT
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OBJECTIVES: An indicator is a clue that helps a health care organization to iden-
tify adverse drug events and assess the overall harm that occurs from medical
care within that organization. The main aim of the study was to investigate use
of an indicator list for identification of adverse events in the health care setting
Methods: The study was a prospective observational study in a tertiary
care teaching hospital. The study mainly involves the review of medical records of
patients in general medical department who were admitted due to drug related
problems with the help of trigger tool. When the presence of indicator is identified,
those cases were thoroughly scrutinized to identify adverse drug events and confirm

role in generic substitution. A cross sectional descriptive study involving the entire
pharmacists working in Tehran community pharmacies (n = 2000) was used using a
self-administered anonymous questionnaire. A total of 1205 questionnaires were
returned indicating a response rate of 60%. Regarding to the first section, 62% of
participants agreed that pharmacists should be given right to generic substitu-
tion. In the second section, 76% believed that the generic medicine are bioequivalent.
Majority of the respondents (73%) stated that, they do substitution once generic
medicine is available. However, they think that patients, physicians and government
have important role in generic substitution. More than half (55%) of pharmacists
believed physicians’ prescription behavior highly influenced by the marketing
and promotion activities of foreign companies. 93% of respondents pointed to full
coverage of generic medicines by providers as a strategy to generic substitution. Summarize
runetage. So, the main objective of this study was to explore the per-
ception of Iranian pharmacists regarding generic substitution, and also to explore
how Iranian pharmacists think about patients' role, physicians' role and government

 inpuriity in
health service.
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