mary and secondary outcomes between January and December 2013 were collected and analyzed. RESULTS: The median percentage of patients admitted for OP poisoning was 0.09% for inpatients, or 0.058$ for outpatients, and 0.0318$ for inpatients. Manpower cost composed 63.1% of pharmaceutical service cost for outpatients and 87.7% for inpatients. Sensitive analysis showed the salary level of hospital staff and professional was the key factor influenced the pharmaceutical service cost. CONCLUSION: Mean manpower cost was the major component of pharmaceutical service cost, measure should be taken to make up the insufficient of this part after implementing drug sale with no markup.

**PH47 INCIDENCE OF DRUG RELATED PROBLEM ADMISSIONS & EMERGENCY DEPARTMENT VISITS IN A SECONDARY CARE HOSPITAL IN SOUTH INDIA**

**OBJECTIVES:** To determine the number and types of emergency department (ED) visits and admissions due to drug related problems (DRPs) in a secondary care hospital, to assess the severity and preventability of these drug related admissions or visits, and to identify the drugs and patient groups that are most commonly involved.

**METHODS:** Patients (n = 450) were selected randomly from patients presented to the ED during the study period (three month). Patient was eligible to be included if either visited ED or admitted due to DRPs. RESULTS: During the study period, 450 patients presented to ED were randomly selected with a mean age of 47.8 ± 27.7 years. One hundred and twenty of them were females (30%) and 280 were male patients (70%). Of these 450 patients, 38 (8.4%) were presented to ED due to DRPs, and 362 (81.5%) patients were presented to ED due to non-drug related problems.

**CONCLUSIONS:** Most DRPs contributed to hospital admissions or visits were avoidable. Direct patient contact can reduce the preventability of DRPs. The study addresses the proper use of medications to ensure the best outcomes of pharmacological interventions.

**PH48 UNDERSTANDING THE NEED AND VALUE OF SURROGATE ENDPOINTS FOR HEALTH CARE DECISION MAKING IN ASIA PACIFIC**

**OBJECTIVES:** This study aims to investigate the knowledge of pharmacists working statistically significant clinical endpoints, payers and decision makers are increasingly looking towards surrogate endpoints for guidance in decision making. Examples include progression free survival as a surrogate for overall survival for oncology products and blood pressure as a surrogate for a variety of cardiovascular endpoints. The purposes of this study is to evaluate the current landscape of surrogate endpoints and their use in clinical decision making in Asia. Pharmaceutical and regulatory guidelines were evaluated from China, South Korea, and Japan, to determine if there was any explicit statement regarding the acceptability of surrogates, the cost-effectiveness of their use, and how they were modeling endpoints used to convert surrogates to hard endpoints. RESULTS: The majority of guidelines in markets evaluated mentioned the use of surrogate endpoints in some capacity, however, no guidelines contained an explicit statement about the acceptability of a surrogate in lieu of an established clinical endpoint. Payers acknowledge the importance of surrogate endpoints, but note that there needs to be further research into the potential impact of substituting these endpoints in pharmacoeconomic and regulatory decision making. CONCLUSIONS: The application and acceptance of surrogate endpoints in Asia is still in its infancy, which is analogous to the use of these endpoints in Europe and the United States. Further research is necessary to establish statistically significant surrogate endpoints, which would bridge the gap between basic science and clinical science. Pharmaceutical and clinical products are brought to market in a timelier manner and reduce the overall cost of clinical trials to health care systems.

**PH49 INVESTIGATING THE KNOWLEDGE OF PHARMACISTS ABOUT COSMETICS PRODUCTS IN PHARMACIES OF TEHRAN (IRAN)**

**OBJECTIVES:** This study aims to investigate the knowledge of pharmacists working in the pharmacies of Tehran about healthy beauty products. METHODS: For this reason, the survey of this study was completed by 200 pharmacists (105 males and 95 females) employed in the pharmacies of Tehran. The most important part of this study was preparing a valid, general and applied questionnaire. Ordinary Multivariate Linear Regression and Multivariate Ridge Regression Tests were used for data analysis besides descriptive indicators. RESULTS: The knowledge of pharmacists working in the pharmacies of Tehran about healthy beauty products was about 69.90%. In addition, results obtained from average responses to the questions of this study about 31%, showed that the response to such items were considerably reliable. It was indicated that the response to these items was at a considerable level. CONCLUSIONS: The results of this study indicate this fact that the awareness of pharmacists about sunscreen care was in average level. For both, average 30% of pharmacists had acceptable knowledge and the results of this study showed that there was no significant correlation between age of pharmacists and their knowledge about that. Increase in their age, will cause decrease in their knowledge to two products, sunscreen care and deplazant. Products we can conclude that having full and accurate knowledge of pharmacists about these products and promoting their scientific knowledge is the first