RESULTS: The pharmacovigilance program involved 1 general hospital (Ass.2 ‘Isontina’, Gorizia-Italy), 12 pharmacies, and 24 GPs. From March 2012 to March 2013, Medigenia enrolled 2074 patients (52.4% women; mean age, 69 [8]). The system totally administered 62,499 drugs (68.2% prescriptions, 28.4% OTC, and 3.4% herbs), and 3028 were the DDIs identified among them. GPs received 2738 alerts for ADR risk (48% moderate risk, 23.2% high risk): treatment was changed 871 times (31.8%). The most frequent alert among high-risk drugs was associated with hemorrhage (87.6%), involving primarily acetylsalicylic acid and warfarin. Moderate risk concerned mainly neurologic sequelae (38.2%) and involved in particular antineoplastic agents and phenytoin.

CONCLUSION: People taking drugs are not always aware of the health risk they are going toward after a multidrug therapy or simply taking a medicine without asking GP, a trend that is increasing in the last years. Medigenia prevents ADR and their health sequelues using a cloud-based approach for pharmacovigilance.

DISCLOSURE OF INTEREST: None declared.

PP028—INFLUENCE OF PHARMACOLOGICAL EDUCATION ON AWARENESS OF THE RISK OF ADVERSE DRUG REACTIONS

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INTRODUCTION: The assessment of the adverse drug reactions risk is an important factor in drug safety monitoring system. The aim of our study was to assess knowledge and attitudes of pharmacologically educated and pharmacologically noneducated students from the University of Montenegro regarding drug safety risk.

PATIENTS (OR MATERIALS) AND METHODS: In this cross-sectional study, a self-completion questionnaire was delivered to 63 pharmacologically educated students (medical students who attended Pharmacology course and passed exams within it), 50 pharmacologically noneducated students (medical students who attended Pharmacology course but did not pass exams within it), and 50 students from other nonmedical faculties at the University of Montenegro.

RESULTS: As expected, pharmacologically educated students are considered to be better informed about ADRs than other participants ($P < 0.01$). Prescription drugs were ranked as less dangerous than self-medication by all participants. Anticoagulants were considered the most dangerous drugs by pharmacologically educated students (median, 7.5; scale, 1–10; interquartile range, 3.75–8), and antidepressants, anxiolytics, and hypnotics by pharmacologically noneducated students (median, 8, all). Information about drug safety significantly influenced the choice of therapy by both groups of students questioned (median, 8, all). All participants concluded that when risk of adverse drug reactions is in question, pharmacologically educated students are much better informed than pharmacologically noneducated medical students and students from nonmedical faculties. Additional educational efforts are necessary to build awareness among general population of adverse drug reactions.

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