RATIONALE: During the 200-year period of drug development progress, 143 drugs were developed for the treatment of schizophrenia. The effectiveness of these drugs was assessed using the Positive and Negative Syndrome Scale (PANSS) at study endpoint. Other studies have also shown that the use of antipsychotic medications is associated with higher costs. OBJECTIVES: The primary objective of this study was to evaluate the effectiveness of atypical antipsychotics in the treatment of schizophrenia and the resulting economic impact. METHODS: In total, 27 randomized controlled trials (RCTs) were selected for inclusion in this study. The costs were adjusted for inflation to 2009 values. RESULTS: The pooled mean cost of medication for schizophrenia in 2009 was $6,375. The mean cost of treatment with atypical antipsychotics was $3,421 (95% CI: $2,597 to $4,246). The mean cost of treatment with typical antipsychotics was $4,852 (95% CI: $4,044 to $5,660). CONCLUSIONS: Atypical antipsychotics are more cost-effective than typical antipsychotics in the treatment of schizophrenia. This is likely due to the lower dose required and the lower incidence of adverse effects. Further studies are needed to determine the long-term economic impact of these medications.

PH503
TRENDS IN POST-MARKETING COMMITMENTS RELATED TO PREGNANCY AND LACTATION
Albanese JD, Roberts SS, Benter U, Whitehouse J
INC Research LLC, Raleigh, NC, USA; INC Research LLC, Munich, Germany
OBJECTIVES: To evaluate the changes in the number of pregnancy and lactation-related post-marketing commitments (PMCs) submitted to the European Medicines Agency (EMA) from 1995 to 2011. METHODS: A retrospective analysis of the EMA's database was conducted. RESULTS: The number of PMCs related to pregnancy and lactation has increased from 28 in 1995 to 50 in 2011, with a peak of 66 in 2007. The proportion of PMCs related to pregnancy has remained relatively stable, while the proportion related to lactation has increased. CONCLUSIONS: The increasing number of PMCs related to pregnancy and lactation indicates a growing awareness of the importance of these commitments for the development of safe drugs for mother and child.

PH504
PHARMA COMPANY POLICIES ON MEDICATION USE IN THE HOSPITAL ENVIRONMENT
M查ter, Gómez D, García-Méndez MP, SIEMES, R, Vázquez C
Hospital Universitario Virgen de la Arrixaca, Murcia, Spain; Universidad de Murcia, Murcia, Spain
OBJECTIVES: To evaluate the implementation of pharma company policies on medication use in the hospital environment. METHODS: A cross-sectional study was conducted in a hospital in Murcia, Spain. A survey was administered to hospital staff. RESULTS: The majority of hospital staff (93%) were aware of the pharma company policies on medication use. However, only 60% of staff stated that they always followed these policies. CONCLUSIONS: There is a need for greater awareness and enforcement of pharma company policies on medication use in the hospital environment to improve patient safety.

PH505
TRENDS IN POST-MARKETING COMMITMENTS RELATED TO PREGNANCY AND LACTATION
Albanese JD, Roberts SS, Benter U, Whitehouse J
INC Research LLC, Raleigh, NC, USA; INC Research LLC, Munich, Germany
OBJECTIVES: To evaluate the changes in the number of pregnancy and lactation-related post-marketing commitments (PMCs) submitted to the European Medicines Agency (EMA) from 1995 to 2011. METHODS: A retrospective analysis of the EMA's database was conducted. RESULTS: The number of PMCs related to pregnancy and lactation has increased from 28 in 1995 to 50 in 2011, with a peak of 66 in 2007. The proportion of PMCs related to pregnancy has remained relatively stable, while the proportion related to lactation has increased. CONCLUSIONS: The increasing number of PMCs related to pregnancy and lactation indicates a growing awareness of the importance of these commitments for the development of safe drugs for mother and child.

PH506
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PH507
REVIEW OF ALL PRODUCTS AUTHORIZED BY THE EUROPEAN MEDICINES AGENCY FROM 1995 TO 2011 IN REGARD TO PEDIATRIC INVESTIGATION PLAN APPLICATIONS
Mouchette J, Acquard C, Emery M2, Maier W2
1EMA; 2Pfizer
OBJECTIVES: Pediatric Investigation Plans (PIPs) were introduced by the European Commission in January 2007 to help ensure that medicines for children are included in the mainstream drug development process in Europe. The objective of this study was to review all authorized products by the European Medicines Agency (EMA) from 1995 to 2011 to identify products with a Pediatric Investigation Plan (PIP), and (2) products with a PIP application. METHODS: The EMA website, the European Public Assessment Reports (EPARs) were searched manually. For each product, the Summary of Product Characteristics (SmPC) was reviewed to explore guidance on indications and pediatric use, if available. RESULTS: In total, 793 products were identified as being authorized by the EMA in the period 1995-2011. CONCLUSIONS: The categorization of authorized products according to the SmPC quotes showed that many products had potential pediatric indications that were not recognized by the EU regulatory authority. This suggests a need for better awareness and recognition of pediatric indications in future regulatory applications.