

VP96 Activities To Optimize Quality And Efficiency Of Medicines In Scotland

Brian Godman (Brian.Godman@strath.ac.uk), Amanj Kurdi, Holly McCabe, Sean MacBride-Stewart, Chris Johnson, Simon Hurding, Marion Bennie and Alec Morton

Introduction. The growing prevalence of non-communicable diseases, combined with greater recognition of the effectiveness of lipid lowering agents (LLAs), has fuelled their increasing use in recent years. Similarly, increasing recognition of mental health and, arguably, societal expectations and pressures, has driven appreciable growth in antidepressant prescribing in recent years. Concurrent with this, growing resource pressures enhanced by the continual launch of new premium priced medicines necessitates reforms and initiatives within finite budgets. Scotland has introduced multiple measures in recent years to improve both the quality and efficiency of prescribing. There is a need to document these initiatives and outcomes to provide future direction.

Methods. Assessment of the utilization (items dispensed) and expenditure of key LLAs (mainly statins) and SSRIs between 2001 and 2017 in Scotland alongside initiatives.

Results. Multiple interventions have increased international non-proprietary name (INN) prescribing (99% for statins and up to 99.9% for SSRIs). They have also increased preferential prescribing of generic versus patented statins with low costs for generics, reduced inappropriate prescribing of ezetimibe due to effectiveness concerns, and increased the prescribing of higher dose statins (71% in 2015). These measures have resulted in a 50% reduction in LLA expenditure between 2001 and 2015 despite a 412% increase in utilization. Initiatives to reduce the prescribing of escitalopram as lack of evidence demonstrating cost-benefits over generic citalopram, along with high INN prescribing, achieved a 73.7% reduction in SSRI expenditure between 2001 and 2017 despite a 2.34-fold increase in utilisation. Concerns with paroxetine, and more recently citalopram and escitalopram following safety warnings, resulted in a considerable reduction in their use alongside a significant increase in sertraline.

Conclusions. Generic availability coupled with multiple measures has resulted in appreciable shifts in statin and SSRI prescribing behavior and reduced ezetimibe prescribing, resulting in improvements in both the quality and efficiency of prescribing to provide future direction.

VP98 Horizon Scanning For New Alternatives To The Treatment Of Leishmaniasis

Juliana Girardi (juliana.girardi86@gmail.com), Daniel Marinho and Flavia Elias

Introduction. The usual treatment of American Cutaneous Leishmaniasis is based on intravenous drugs of the 1940s and causes adverse events, having as first choice pentavalent antimonials that require clinical and laboratory follow-up in the hospital

setting. The present study aimed to identify potentially more effective and safe oral therapies, applying Technological Horizon Scanning.

Methods. The searches were divided into three blocks: clinical trials through the Clinical Trials Registry Platform on the WHO search portal; searches in the PubMed, Embase, Cochrane Library, Lilacs and Center for Reviews and Dissemination databases; and search for patents in the Orbit base. The searches aimed at identifying drugs, authors, institutions and therapeutic classes in order to proceed with scanning process.

Results. We found 197 studies and selected 33 in the Americas region. Of these, seventeen (51%) investigated miltefosine, six (18%) had azithromycin, four (12%) Fluconazole, two (6%) pentoxifylline, two (6%) allopurinol and one (3%) terbinafine. Of the 26 clinical studies, twelve presented positive results for oral medications, six related to miltefosine, two to fluconazole, two to pentoxifylline, one to azithromycin and one to allopurinol. Through the analysis of patents, 35 documents involving 32 institutions and 134 inventors were identified. Of the 32 institutions that registered patent documents, Novartis is the one with the highest number of inventors.

Conclusions. Miltefosine is in the incorporation phase in the Brazilian health system, evaluating its performance and effectiveness in the services. Pentoxifylline was recently incorporated as a coadjuvant to the treatment, and Fluconazole presented positive results, however with a small number of patients and uncertain outcomes. It is recommended to carry out more research directed to the drug association, since the studies indicate the possibility of decreasing occurrence of relapses, dosages and treatment time, increasing adherence to treatment.

VP99 Study On The Responsiveness Of Primary Medical Institution In ZJ & QH

Jingming Wei (weijm@zju.edu.cn) and Hengjin Dong

Introduction. The health system responsiveness, defined as non-medical aspect of treatment relating to the protection of the patients' legitimate rights, is the intrinsic goal of the WHO strategy for 21st century, and is an important index to measure the service ability of medical institutions.

Methods. The data were collected in 2016-2017 and consists of the first visits for patients of grass-roots medical institutions. SPSS21.0 was used to complete statistical description and tests including multiple linear regression model analysis and structural equation analysis.

Results. There are differences in perceived responsiveness of primary medical institutions in Qinghai and Zhejiang. Zhejiang residents believe that the primary medical institutions have better medical environment, medical staff have better attitudes to explain problems, treatment plan explanation is more clear, and the attitude toward listening to patient condition is more serious. However, Qinghai residents think that the waiting time of the basic medical institutions is shorter and the degree of trust in the medical staff is higher. There are differences in health system responsiveness among different groups. According to the standard of $\alpha=0.05$, factors such as ethnicity, household registration