

**RESULTS:** Overall, 75% [95% CI: 70-81] were solid ODF (tablets, capsules): They accounted for 67% [95% CI: 59-75] and 94% [95% CI: 86-99] of ODF given to children aged 0-6 and 6-12 years, respectively. About two-thirds of solid ODF given to children aged 0-6 years were manipulated by pharmacists or parents before administration compared to 21% [95% CI: 11-32] given to older children. They were either crushed (75%) or segmented (25%). Water was the main solvent [80%, 95%CI: 68-91]: Use of safe water was reported in two-thirds of instances. For liquids, measuring cups were used in 73% [95% CI: 61-86] of instances.

**CONCLUSIONS:** Inappropriate use of solid ODF of medicines appears to be the major determinant for irrational administration practice in children.

### OP - 03

**Comparison of two sets of explicit criteria to determine safety of medicines prescribed to elderly patients admitted to a medical ward in a tertiary care hospital**

Lokusuriya UL, Pelpola PTK, Wanigasuriya JKP, Wanigatunge CA  
Faculty of Medical Sciences, University of Sri Jayewardenepura

**OBJECTIVES:** To identify potentially inappropriate prescriptions (PIPs) prescribed to elderly admitted to an acute medical ward by using 'Screening tool of older person's prescriptions' and 'Screening tool to alert doctors to right treatment' (STOPP/START) and Beers' criteria during acute admission and at discharge; to compare rates of detection of PIPs using these two sets of criteria.

**METHOD:** Prescriptions at the time of admission and at discharge of 400 elderly ( $\geq 60$  years) patients were included in the study. Medicines prescribed were extracted from bed head tickets during acute admission and at discharge. Potentially inappropriate medicines (PIMs) were detected with two sets of explicit criteria - STOPP/START and Beers'.

**RESULTS:** We analysed 2759 medicines from 400 prescriptions at the time of admission and 2353 medicines from 400 discharge prescriptions. There were 307 (76.8%) and 265 (66.3%) prescriptions with  $\geq 5$  medicines during acute admission and at discharge. Total number of PIMs identified in admission prescriptions with STOPP/START was 170 (6.2%) and 58 (2.1%) when Beers' criteria were applied. STOPP/START identified 161 (6.8%) PIPs from the discharge prescriptions while Beers' identified 51 (2.2%). Of the 400 prescriptions on admission, 28.5% had PIPs detected by STOPP/START criteria and 14.5% with Beers. On discharge 110 (27.5%) and 51 (12.8%) prescriptions had PIPs detected with STOPP/START and Beers' respectively.

**CONCLUSION:** PIPs are a problem in acute hospital admissions. Compared with Beers', STOPP/START criteria are more likely to detect PIPs. Early identification of PIPs is likely to reduce risk of drug related adverse reactions in the elderly.

### OP - 04

**Twice daily dosing schedule of intravenous gentamicin causes high trough levels in a high percentage of neonates.**

Seneviratne HM, W<sup>1</sup>, Alexander A<sup>1</sup>, Gunawardhana J<sup>1</sup>, Ranawaka MRSUC<sup>2</sup>, Menike N<sup>2</sup>, Somaratne KMK<sup>3</sup>, Dissanayaka P<sup>4</sup>

<sup>1</sup>Department of Pharmacology, Faculty of Medicine, Peradeniya

<sup>2</sup>Teaching Hospital, Kandy

<sup>3</sup>Base Hospital Rikillagaskada

<sup>4</sup>Teaching Hospital Peradeniya

**CONCLUSIONS:** Medication-related errors were common in prescriptions of inmates in elderly care homes. Services of a dedicated pharmacist may help to improve quality use of medicines among inmates in elderly care homes in Sri Lanka.

### OP - 06

**Knowledge and practice gaps related to rheumatoid arthritis and medicines used by patients with rheumatoid arthritis and their perception on related pharmacy services**

Vithana LM<sup>1</sup>, Dissanayake DJC<sup>1</sup>, Wijayaratne LS<sup>2</sup>, Samaranayake NR<sup>1</sup>, Wanigatunge CA<sup>1</sup>

<sup>1</sup>Faculty of Medical Sciences, University of Sri Jayewardenepura

<sup>2</sup>National Hospital of Sri Lanka

**OBJECTIVES:** To assess knowledge and practice gaps related to rheumatoid arthritis (RA) and medicines prescribed for it, and to identify the need for specific pharmacy services, among patients attending a rheumatology clinic in a tertiary care hospital in Sri Lanka.

**METHOD:** An in house developed interviewer administered questionnaire and clinic records were used to collect data from consecutive patients with RA attending the Rheumatology clinic.

**RESULTS:** Of the 397 patients, 94% were females, 44.5% were between 46 to 60 years and 49.9% were those with rheumatoid arthritis for  $\geq 10$  years. Physical exercise (45.6%) and use of topical preparations (47.6%) were the additional treatment modalities used. Physicians were the main source of information (97.5%). Knowledge score about the disease was less than 11/15 in the majority (64.0%). Some (21.7%) believed that RA can be completely cured. The majority did not know medicine names, strengths and side effects of individual medicines used. Approximately 40% knew side effects generally for all medicines. Only 40.1% knew folic acid was given to reduce side effects of methotrexate.

Significant associations were identified between socio-demographic factors (age, level of education, income, gender) and knowledge on medications/medication use practices for certain specific medicines. The majority (82.7%) preferred to have a better interaction with the pharmacist and 87.2% stated that they would like to have counselling sessions.

**CONCLUSIONS:** This study confirms the existence of knowledge and practice gaps in the selected population. We recommend greater involvement of the pharmacy services to improve identified knowledge and practice gaps related to medicines.

### OP - 07

**Analysis of adverse drug reaction reports received by a central monitoring centre**

Paherathy A<sup>1</sup>, Ganesanaththy P<sup>1</sup>, Sri Ranganathan S<sup>1</sup>, Amarasinghe ATIM<sup>2</sup>, Rameshkumar T<sup>1</sup>, Haputhanthrige IU<sup>1</sup>, Jayasinghe S<sup>2</sup>, Jayakody RL<sup>1</sup>

<sup>1</sup>Department of Pharmacology, Faculty of Medicine, University of Colombo

<sup>2</sup>Department of Pharmacology, University of Ruhuna

**OBJECTIVES:** To analyse the adverse drug reaction (ADR) reports received by Department of Pharmacology, University of Colombo.

**METHOD:** ADR reports received from January 2014 to May 2017 were analysed for patient demography, source of reports, types of reactions, implicated medicines, severity, outcome and reporters. Anaphylaxis