

**P14 DRUG UTILIZATION STUDY BEFORE AND AFTER THE
MANAGERIAL INTERVENTION AT KING CHULALONGKORN
MEMORIAL HOSPITAL**

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ABSTRACT

Economic crisis in Thailand during 1997 had a major impact in all section of the country including health care. There were several suggestions for reducing drug expenditure budget including restriction of hospital formulary, generic prescribing and generic dispensing. At King Chulalongkorn Memorial hospital, the new hospital formulary was established and implemented on March 1998. The generic dispensing policy was also in place at the same time. This study aimed to evaluate the impact of the new implementation by comparing the prescription patterns in out patient departments (OPDs) of the hospital before and after the new hospital formulary implementation. The prescriptions from several OPDs were systematically stratified sampling 5 weeks before and 5 weeks after March 1st, 1998. The information from the prescriptions including drug category, drug name, amount of dispensed drug, drug cost, etc.) was collected and analyzed. The total number of the prescriptions and the average number of drug items/prescription before and after the implementation were similar (2049 vs 2052, and 2.52 ± 0.048 vs 2.45 ± 0.03 respectively). The total cost of the prescription, the cost/prescription and the cost/item seemed to be different (1,6090,484 Bath vs. 1,282,343 Bath, 844 ± 54.04 vs. 633 ± 41.11 and 332.58 ± 29.59 vs. 255.29 ± 19.98 respectively) After the implementation, physicians in the hospital increasingly prescribed drugs by generic name (37.1% vs. 44.85%). Local made drugs were also prescribed by the physicians and received by patients more than before (9.56% vs. 84.27% and 28.15% vs. 60.72% respectively). Anti-infective agents were studied in depth as they contribute to significant amount of drug expenditure. The total cost of prescribed anti-infective agents and the cost/prescription were increased after the implementation (223,529 vs. 274,435 Bath and 585.38 ± 102.84 vs. 772.71 ± 147.59). The increased cost mainly came from the cost of anti-HIV drugs. Our data indicate that the new hospital formulary can reduce drug expenditure budget and change prescribing attitude of the physicians in King Chulalongkorn Memorial hospital.

References

1. Hospital Formulary March 1998.
2. Drug expenditure data of King Chulalongkorn Memorial hospital 1997-1998.