

ANALYSIS OF RATIONALITY OF PHARMACOTHERAPY OF PATIENTS WITH ACUTE CORONARY SYNDROME

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Introduction. Acute coronary syndrome (ACS) - a group of clinical signs and symptoms of coronary heart disease, which give reason to suspect acute myocardial infarction (AMI) or unstable angina. The annual incidence of ACS in industrialized countries - 6 cases per 10 000 population. Pharmacotherapy of acute coronary syndrome is expensive, so it requires optimization of cost.

The aim of research - evaluation of rationality of pharmacotherapy of patients with ACS.

Materials and methods. The integrated ABC/ VEN/frequency analysis of drugs prescriptions were used.

Results and discussion. The analysis of drugs prescriptions for 100 patients with ACS were conducted. For the patient treatment 110 INNs were prescribed. Number of prescriptions per patient were 11.87, indicating polypharmacy. The results of integrated ABC/VEN/frequency analysis showed, that the group A consisted of 17 INNs, 15.89% of the total number of drugs and 39.34% of the total number of prescriptions. Costs on medicines of group A accounted 80.34% of the total costs for treatment of ACS. From group A 14 INNs were classified as vital (V) and 3 INNs were classified as non-essential (N). Group B consisted of 23 INNs, 21.5% of the total number of INNs and 24.18% of the total number of prescriptions. Costs on medicines from group B accounted 15.13% of total expenses for ACS treatment. Twenty INNs from 23 INNs were classified as essential, three INNs were classified as non-essential metabolic drugs. Most of the costs was spent on vital drugs, which accounted 89.97% of total prescriptions in this group. The least costly group C (4.53% of total expenses for treatment of ACS) consisted of 70 INNs, which accounted 62.61% of the total INNs and 36.48% of the total prescriptions. 56 INNs from group C are classified as vital. 14 INNs or one fifth of drugs (20%) were classified as non-essential.

Conclusion. The analysis indicates a high level of rationality of costs and pharmacotherapy of patients with acute coronary syndrome.