

INTRODUCTION

ACCEPTABILITY

- Influence **compliance**
- Use of various **strategies** to facilitate drug administration
- Issue pertinent to **pediatric medications dispensed in hospital pharmacies** (whether custom pharmaceutical preparations or commercial drugs)

OBJECTIVE : Evaluate the challenges faced by caregivers when administering and compounding pediatric drugs provided by our hospital's pharmacy

MATERIALS ET METHODS



- ✓ Distribution of a questionnaire in our hospital pharmacy
- ✓ To caregivers of children under 12 years old
- ✓ Over a 4-month period

DISCUSSION - CONCLUSION

Ready-to-use is not a synonym for **ready-to-administer**.

It seems essential to **reinforce the pharmacist's counsel role** with caregivers, to ensure the safe administration of drugs.

Particularly **drugs not ready-to-administer** that require an additional step of dispersion in food which can influence drug bioavailability.

RESULTATS

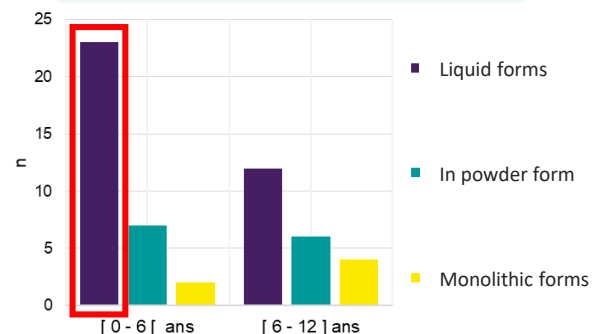


54 questionnaires were collected



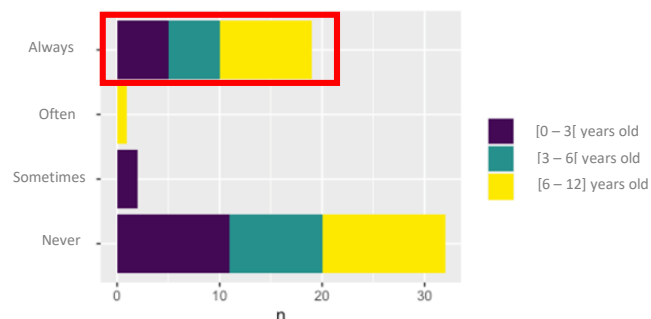
59% under 6 years old

A Distribution of galenic forms



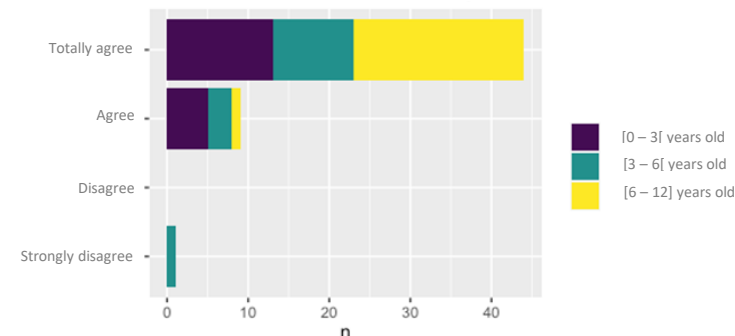
B Administration with food

Do you use food or drink to administer the medication to your child ?



C Enough information ?

Do you feel you have enough information to prepare and administer the medication to your child safely (through the leaflet or advice) ?



D Preparation phase

- **22%** of **pharmaceutical preparations** (powder packaged in openable capsules)
- **26%** required an **additional compounding step** before the administration (opening capsules or tablets for oral suspension)

E Opening capsules / Tablets crushing

No respondent reported **crushing tablets**
Three reported **opening capsules** of commercial drugs (on the advice of their healthcare professional)