

A PRE-SURVEY EXTEMPORANEOUS COMPOUNDING FOR PEDIATRIC IN THAILAND HOSPITALS

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Abstract

Extemporaneous compounding was often used in pediatrics due to no suitable formulation. But there was no data about pharmacy practice of medication preparing extemporaneously in hospital. The purposes of this study were to define the methods, problems and list of medicine for extemporaneous compounding.

Method : The self-report questionnaire had been launched in march 2012 to 200 hospitals of varying sizes. The questionnaire was asked for the methods, problems and list of medicine for extemporaneous compounding .The data had been analyzed descriptively.

Result : There were 44 returned questionnaires including the analysis (22 %). Out of 44 hospitals: 23 were general hospitals (more than 120 beds) and 21 were community hospitals (less than 120 beds). The concern of the pharmacists on problem level in extemporaneous compounding was moderate to high. General hospitals have pharmacists in manufacturing department (95.65 %) who are responsible for extemporaneous compounding in oral liquid preparation. The main problem in preparation was the lack of chemical stability information (68.18 %). The community hospitals had no specific pharmacists who took responsibility (47.62 %).

Extemporaneous compounding was prepared by crushed tablets dispensing in water or syrup prior to administration. The main problem of the preparation was the lack of material (45 %). Most pharmacists agreed with extemporaneous compounding training course. Top Three drug classifications that had been prepared extemporaneously were infection (38.89 %), cardiovascular system (29.91 %) and gastro-intestinal system (11.97 %) respectively.

Conclusion : Extemporaneous compounding of Thai hospitals was a common problem. The methods of preparation were varied between hospitals. Most pharmacy needed a practice guideline in preparation to ensure that medicines were good quality, effective and safe.

Key words: extemporaneous compounding, pediatric.