a key role in geriatric population' use of OTC medications. To ensure that elderly patients are able to manage their non-prescription medicines and do not suffer from adverse effects caused by excessive or inappropriate consumption of this medicines, it is necessarily to achieve greater partnership in medicine taking between elderly patients and pharmacists.

**Aim of the study.** to determine the over-the-counter drug consumption pattern of elderly people in pharmacist's point of view and to highlight a need for improved pharmacy education around OTC drugs use in the elderly.

**Materials and methods.** The study was a cross sectional study on pharmacists dispensing OTC medicines for elderly visitors in community pharmacy. The pharmacies were selected randomly and then pharmacists were interviewed by using standardized questionnaires that includes 10 questions, with 7 closed-ended and 3 open-ended questions. Descriptive statistics (frequencies and percentages) were used to summarize the data. All analyses were performed using SPSS for Windows version 22.0.

**Results.** Data on the use of OTC medications in the elderly were collected by questioning pharmacists. The majority of pharmacists responded that elderly people visit community pharmacy to medication supply; 91.8% of them got drugs from medical prescription and 76,4% practiced self-medication. 73% of the elderly practiced to ask question about their medication, 95,4% of them ask about the right way to administer and 80,7% about indications (uses for the drug). Older adults used OTC medications to treat pain (73%), colds (51%), headaches (49%), constipation (31%), diarrhea (25%), fever (25%), coughs (22%), insomnia (20%) and others. Concerning OTC drugs used by elderly, the most of them took citramon (60%), acetaminophen (53,6%), pancreatin (44,5%), ibuprofen (42,7%) and others. 65% of the respondents indicated that elderly patients frequently return to their pharmacy for asking further counseling and appreciated the compliance to the OTC therapy as satisfactory (55%).

Conclusions. The results of the study indicate that it's important to encourage elderly patients further to seek pharmacist's professional advice before purchasing OTC medicines, especially on supporting effective use of NSAID medicines and promoting patient education on pain. Pharmacists are in an excellent position to continue education in geriatric care, which would increase the demand for pharmacists with the skills, knowledge, and experience to care for elderly people.

Key words: elderly people, pharmacist, community pharmacy, OTC drug

## 371. PHARMACEUTICAL CARE OF CHILDREN WITH TYPE 1 DIABETES MELLITUS IN REPUBLIC OF MOLDOVA

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**Introduction.** Prevalence of type I diabetes mellitus (T1DM) among children and adolescents in Republic of Moldova presents 397 cases, signalling an annual increase of 5,8%. Poorly managed diabetes leads to serious complications and early death.

**Aim of the study.** Evaluation of pharmacists competencies in providing pharmaceutical care to children with type I diabetes and establishing the direction to improve level of competencies of them.

**Materials and methods.** As a method of study, has been used the quantitative analysis through the closed questionnaire, sample size: 100 pharmacists.

**Results.** As a result of the review of the literature has been identified the following competencies necessary for the pharmacists to provide pharmaceutical care to children with T1DM: general knowledge, blood glucose monitoring, drug administration, premedical and medical care, healthy

eating, physical activity, prevention of late complications. Pharmacists have general knowledge about the notion of T1DM (73%); 71% of those surveyed know that T1DM cannot be prevented and 86% know that this disease is manifested in children, adolescents and young adults. Blood glucose monitoring: 43.3% of respondents think, that the glycaemic targets in children is 3.8 and 8.3 mmol/l. Insulin injection sites: 55% of the pharmacists had answered to the abdomen, and as modern medical devices used, 50% know about the glucose meter. The treatment for T1DM involves: insulin injections and periodic self-monitoring of insulin (84.8%) and an average of 28% know all types of insulin. If a patient with hypoglycaemia is present in the pharmacy, 77% responded that they would call the ambulance and offer sugar to the patient. Speaking about healthy eating, 78% can provide nutrition counselling and on average 30% recommend fibers and protein. In T1DM, physical effort is recommended after the peak of insulin action (50 %) and they recommend walking and running (94%). On average 14% of pharmacists know all the long-term complications of diabetes and 87% would like to be trained to provide counselling to these patients.

Conclusions. Pharmacists could provide counselling to children with type T1DM about: healthy eating, physical activity, adherence to treatment, monitoring, problem solving, reducing risks. Fewer competencies are attested about: glycaemic targets in children, the types of insulin, the duration of their action, insulin injection sites, long-term complications. As the level of care increases, pharmacists' knowledge increases through experience, continuing education, individual study, and mentorship. There is a need of more strong collaboration with physicians, diabetes associations and development of special training courses for pharmacists.

Key words: type I diabetes mellitus, pharmaceutical care

## 372. COMPARATIVE ANALYSIS OF LEGAL PROVISIONS ON PRESCRIPTION OF

## **DRUGS IN DIFFERENT COUNTRIES**

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**Introduction.** The medical prescription is a written document, addressed to the pharmacist, signed and initialled by the doctor, in which is indicated the patient's medication in ambulatory conditions. The prescription authorizes the release by a pharmacist of a specified quantity of drugs under the control of the legislation in the field.

**Aim of the study.** Comparative analysis of legislation on prescription of drugs in the Republic of Moldova and other countries.

**Materials and methods.** Have been evaluated State Drugs Nomenclature, reglementation of medicines prescription in different countries, literature review of prescriptions forms of drugs.

Results. Currently, in Moldova, according to State Drugs Nomenclature are authorized 4952 drug names, of which 1430 are included in the OTC list, that constitutes 28.9%, respectively 3522 drug names, according to the legislation in force requires medical prescriptions to be released by the pharmacist. In Romania are authorized 35138 drug names, of which 2077 are OTC, that represents 6%. The family physicians and specialists are the ones who can prescribe a prescription, but the compensated drugs can only be prescribed by the family doctor. In the Republic of Moldova the prescriptions are made only on paper, in accordance with the provisions of the Order of the Ministry of Health no. 960 of 01.10.2012. In Romania and North Carolina most recipes are electronic, this helps to increase the quality of the medical act, significantly reducing the risk of error during the enrolment. The engine of medical rules (drug interactions, contraindications, correlations between diagnosis, age and prescription drugs), the