

pressure monitor, dipsticks for glucometer, glucometer, H. pylori test, pregnancy test, and HIV test. The results were as follows: pregnancy test – 85%, blood pressure monitor – 62%, dipsticks for glucometer and glucometer - 52%; H. pylori test – 10%; HIV test – 2% (only in one chain pharmacy in urban area). Pharmacy services provided in pharmacies related with medical device investigated was following: measure of blood pressure- 76%, measure of glycaemia – 2%, counselling on teenage pregnancy – 0%.

Conclusions. The availability of medical devices in community pharmacies is directly correlated with the location, being much higher in the urban area. However, pharmaceutical services related to these devices are practically not provided in the Republic of Moldova, except for blood pressure measurement.

Key words: pharmacist, community pharmacy, medical devices, tests, counselling.

417. EVALUATION EQUITY IN ACCESS TO MEDICINES USING CONCENTRATION CURVE IN REPUBLIC OF MOLDOVA

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Introduction. Equitable access to medicines is one of the essential challenges in developing and transitional countries. It is stated that about one-third of the populations around the world do not have equitable access to essential medicines. The prices are often unaffordable for majority of population. This has made medicines the second largest family expenditure after food and has made the cost of the medicines unaffordable for a huge number of people. Up to 50% of medicines are inappropriately prescribed or dispensed and up to 50% are used incorrectly by patients. This leads to significant wasted resources, the potential to drive the development of drug resistance and to poor health outcomes. Many patients, especially the poor, rely on the informal sector for their health care needs including medicines, while respective vendors have little or no pharmacy training.

Aim of the study. Assessment the equity in access to medicines in Republic of Moldova through health system perspective.

Materials and methods. Have been conducted a descriptive cross-sectional study of international practice on strengthen policy framework on equitable access to medicines; secondly has been done a quantitative study using concentration curve on the population of Republic of Moldova regarding the access to medicines.

Results. Equity is one of the fundamental principles and right of people in the healthcare system worldwide. According to World Health Organization, equity is the absence of avoidable or remediable differences among groups of people, whether those groups are defined socially, economically, demographically, or geographically. Health inequities therefore involve more than inequality with respect to health determinants, access to the resources needed to improve and maintain health or health outcomes. From the previous authors study have been disclose the following access indicators and barriers to medicines with different access incentives (AI): geographical accessibility (8-AI), affordability (7-AI), availability of medicines (8-AI) and acceptability (2-AI). The two key variables underlying the concentration curve are the access to medicines variable, the distribution of which is the subject of interest, and a variable capturing living standard against which the distribution is to be assessed. The health variable

must be measured in units that can be aggregated across individuals. This is not necessary for the living standards measure, which is used only to rank individuals from richest to poorest. First step in concentration curve analysis is to score the indicators of access based on discomfort and annoyance caused by unavailability of medicines. The higher scores of indicators determine the power of influence on access to medicines. These results will be correlated with the following factors: demographic, age, gender; socioeconomic factors: ethnicity (Caucasian and non-Caucasian), housing condition, level of education, income (monthly family income per head), classified per quintiles.

Conclusions. The present study provides insights into the socioeconomic factors associated with access to medicines in Republic of Moldova. Knowledge about inequalities in access to medication is important for health policies to contribute to reducing inequalities in health care services use and will be investigated more deeply.

Key words: equity, population, access to medicines.

418. DEVELOPMENT OF ECONOMIC MODEL FOR ASSESSMENT OF POTENTIAL SIGNIFICANCE OF PHARMACIST INTERVENTIONS

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Introduction. Pharmacists contribute to reduce the number of medication errors during medication review. Assessing the significance of pharmacist interventions (PIs) is essential to demonstrate the added value of pharmacists. Methods and tools for assessing the potential significance of PIs are diverse and their properties are questionable.

Aim of the study. Assessment of significance of pharmacist intervention for health system to obtain additional resource in clinical pharmacy practice.

Materials and methods. A systematic review was performed in the databases PubMed (1982 – March 2020), MEDLINE/EMBASE (2000 - March 2020), (1999 - February 2013), Cochrane library (1999-March 2020) and Scientific Electronic Library Online (SCIELO) (2001- 2019) in order to collect studies using tools for assessment of potential significance of an individual PI. Have been used two groups of keywords as the main search: drug-related problems and pharmacist interventions.

Results. Adverse drug events are the major problems relating to patient safety and wellbeing. They are associated with increased rate in morbidity and mortality, extended hospitalizations, and higher costs of care. Reviewing literature have been determine that it is possible to classify the approaches of assessing the significance of an individual PI into 3 main types: approach 1 - the evaluation of actual consequences of drug related problems (e.g., actual severity of harm); approach 2 - the evaluation of actual consequences after performing a PI and following-up the patient (e.g., actual clinical outcomes); or approach 3 - the estimation of potential significance of a PI. Term “actual” is used as meaning the entity that has appeared in the patient, while the term “potential” referred to the situation in which the possibility that the entity could appear in the patient existed. The conceptual models of Donabedian suggested that the quality of healthcare interventions could be assessed through three types of indicators related to “structural features”- appropriate resources and system design; “process of care”- the method by which health care is provided; and “outcome”- the consequence of the health care provided,