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#### The output of a hospital-based phamacovigilance system in a referral center in north of Iran

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**Introduction:** Medications are the backbone of therapy in healthcare system, however adverse drug reactions (ADRs) are unpreventable, and drug safety surveillance is a key solution to prevent fatal events in hospitals. The aim of this study was to present ADRs encountered in a referral hospital in North of Iran.

Methods: This study was conducted at Imam Khomeini hospital, a teaching hospital affiliated to Mazandaran University of Medical sciences, Sari, Iran. ADRs reported by Healthcare professionals including nurses, pharmacists, general physicians, specialists and the other therapeutic staff were evaluated. Frequency of ADRs, suspected medications, the final outcome of ADRs was evaluated in the study.

**Results:** A total of 109 yellow cards were completed during 2016-2017-2018, most of the reports were generated by nurses (61 cases, 56%) followed by pharmacists (42 cases, 39%). Twenty four drugs were identified to cause adverse events. Rash and skin eruption was the most ADR reported (59 cases, 54%).

**Discussion:** The most adverse drug reactions were reported by Vancomycin injection (20cases, 18%) followed by Ciprofloxacin (12 cases, 11%) and Metronidazole (7 cases, 6%). 88 cases (81%) completely recovered after experiencing ADRs and in one case the reaction leaded to the mortality (Anaphylactic reaction following Vancomycin). In fifty eight cases, the suspected drug was discontinued.

**Conclusion:** Cutaneous reactions were the most prevalent event experienced by patients and vancomycin was the most associated drug. Nursing staff had the highest participation rate among health care professionals in ADR reporting.

#### **Biography**

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