vasodilators (C04) - pentoxyphilline and nicotinic acid; in angioprotectors (C05) - Horse chestnut extracts and quercetin; in beta-blockers (C07) - bisoprolol (23.3%) and carvedilol (20.3%); in Ca^2-channel blockers (C08) – amlodipine and nifedipine; in ACEI + sartans group (C09) – enalapril and lysinopril (27.9% and 12.9%) and in hypolipidemic drugs (C10) – atorvastatin and simvastatin. 92.2% cases were not serious. Also we found significant decrease in polypharmacy cases, mostly due to decrease of cases with 4 and 5 accomponying drugs ($p < 0{,}0001$). Also, we registered 5 lethal cases.

Conclusions: We have determined high-risk CVD which need special attention of doctors of different specialties.

554. Are Patients Ready to Take Part in the Pharmacovigilance System – A Portuguese Preliminary Study Concerning Drug Reaction Reporting

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Background: New Pharmacovigilance legislation allows patients to report ADRs directly to competent authorities in all EU member states. Patient reporting is available in Portugal since July 2012. In 2013 the National Pharmacovigilance System (NPS) had received 3217 spontaneous ADR reports, of which only 1.15% (n = 37) were reported by patients. Under-reporting remains a reality in Portugal, although patient reporting could be one of the measures to reduce the rate of under-reporting by healthcare professionals.

Objectives: The aim of this study was to describe the attitudes and knowledge of the patients regarding spontaneous reporting and the reasons and patient opinions that can influence patients ADR under-reporting.

Methods: A descriptive-correlational study was performed looking for patient's attitudes and knowledge regarding spontaneous reporting. A 6-months survey was conducted from June to November 2013 in general adult patients from a community pharmacy in Coimbra, Portugal, that used prescribed medicines or OTC-drugs. Attitudes and opinions were surveyed in a closed-answer questionnaire using a Likert scale. Incomplete questionnaires and answers from Healthcare professionals were excluded from data analysis. The data were analyzed using descriptive statistics, $\chi 2$ tests and Spearman's correlation coefficients.

Results: A total of 1084 questionnaires were collected with a response rate of 81,1%, 948 completed questionnaires were selected for analysis. Of the respondents, 44.1% never heard about NPS. Younger people and those with a higher education were significantly more likely to be aware of NPS. Only 1 patient had previously reported an ADR directly to NPS. Reporting ADRs indirectly through a HCP was preferred by 62.4%. The main reasons for patients to do a spontaneous report would be the severity of the reaction (81,1% agreed or strongly agreed) and worries about their own situation (73,4% agreed or strongly agreed).

Conclusions: Patients are most likely to do a spontaneous report about a severe reaction or if they are worried. Good information on ADR reporting could increase the number of reports from patients in Portugal.

555. Analysis of Adverse Drug Reactions in Hanyang Univ. Hospital Drug Safety Center

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Background: Pharmacovigilance is the pharmacological science relating to the collection, detection, assessment, monitoring, and prevention of adverse effects with pharmaceutical products. Hanyang Univ. Hospital was designated as Local Pharmacovigilance Center in January 2011 and established OCS adverse drug reactions (ADR) reporting system.

Objectives: Through monitoring of ADR reporting system, the objective is to achieve patient safety and contribute to the active drug surveillance and quality improvement of adverse event reporting.

Methods: This study was analyzed on the basis of spontaneously reported ADRs in Hanyang Univ. Hospital OCS(Order Communication System) from January 2012 to December 2012. Analysis topics include patients analyzed, classified by symptoms of adverse drug reactions, indications, causality assessment, seriousness assessment and pathogenesis.

Results: The ADRs were reported in the elderly over 65 years(64.9%) and children under the age of 12 (3.1%) who are vulnerable to adverse drug reactions.

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