Background
Antiulcerative agents are one of the most commonly prescribed drugs in Korea and worldwide. This study aimed to review the drug utilization pattern of antiulcerative agents for the elderly people in Korea.

Method
The study population were geriatric inpatients of community hospitals between 1993-1994, aged 65 years or over, beneficiaries of the Korea Medical Insurance Corporation(KMIC) and residing in Pusan city. The information on the drug exposure was collected from the claims data of hospital where the cohort members received medical care between 1993 and 1994. The information included personal identifier, age, gender, diagnosis for prescribing , dosage, data of prescription and name of medical institutions where the study population were prescribed.

Results
The number of patients prescribed antiulcerative agentsbetween 1994 and 1994 was 1,051(64.9%) male and 1,724(65.5%) female. Antacid and composite agents were most frequently prescribed antiulcerative agent(70.8%), and the second most frequently prescibed antiulcerative agent was H2 antagonist(16.0%). The antiulcerative indicated diagnosis categorized in ICD-9 in whom antiulcerative agents were prescribed at least once during any of inpatient period was only 29.6% for all antiulcerative agents.

Discussion
The study result could be used as a fundamental data for further drug utilization review for antiulcerative agents.

[PF1-4] [10/19/2001 (Fri) 14:00 ~ 17:00 / Hall D]

Effect of Joins, a New Herbal Anti-Arthritic Agent, in Patients with Osteoarthritis of the Knee: a Double-Blind Placebo Controlled Phase 2 Study

Jung Young-Bok, Roh Kwon-Jae, Jung Jin-A, Jung Ki-Won°, Yoo Hun-Seung, Cho Yong-Baik, Han Chang-Kyun, Kwak Wie-Jong

Department of Orthopaedic Surgery, Yongsan Hospital, Chung-Ang University, Department of Orthopaedic Surgery, Ewha Women's University Hospital, Life Science Research Center, SK Chemicals

Joins (SKI 306X) is a purified extract from a mixture of three oriental herbal medicines (*Clematis mandshurica, Trichosanthes kirilowii* and *Prunella vulgaris*) that have been widely used for the treatment of inflammatory diseases such as lymphadenitis and arthritis in far East Asia.
A double-blind, controlled phase 2 study of Joins was performed in patients with osteoarthritis (OA) to evaluate the efficacy and safety of Joins with placebo in 96 patients with classical osteoarthritis of the knee. Patients were randomized to four treatment groups: placebo, 200 mg, 400 mg and 600 mg of Joins *t.i.d.*. Clinical efficacy and safety were evaluated for 4 weeks continuous treatment. Joins demonstrated its clinical efficacy, as assessed by 100mm visual analogue scale (VAS), Lequesne index and patients' and investigators' opinion of the therapeutic effect compared with placebo. ($p<0.01$) Result from this study indicated that Joins had a similar good efficacy profile when administered 200, 400 and 600 mg. No significant adverse events were observed in patients treated with Joins. Considering the pharmaco-economical aspect of Joins, the dosage of 200 mg *t.i.d.* will be most suitable. This study demonstrated that Joins, a new herbal anti-arthritic agent provided clinical efficacy in patients with osteoarthritis.

[PF1-5] [10/19/2001 (Fri) 14:00 ~ 17:00 / Hall D]

Randomized Double-blind trial of the Efficacy and Safety of Joins, a New Herbal Anti-Arthritic Agent vs. Diclofenac in Patients with Osteoarthritis of the Knee

Jung Yong-Bok, Seong Sang-Cheol, Lee Myung-Chul, Kim Jung-Man, Ahn Jin-Hwan, Roh Kwon-Jae, Cho Yong-Baik, Han Chang-Kyun, Jung Jin-A°, Chan Don-Yong, Park Byung-Joo

Yongsan Hospital, Chung-Ang University, Seoul Natinal University Hospital, The Catholic University of Korea, Sungkyunkwa University and Samsung Medical Center, Ewha Women's University Hospital, Life Science Research Center, SK Chemicals

A randomized, double-blind, active comparator-controlled trial of Joins (SKI 306X) in 249 adults with OA was performed in patients with osteoarthritis (OA) to compare the clinical efficacy with that of diclofenac SR and to evaluate the safety and tolerability. Patients were randomly assigned to receive 200 mg of Joins three times daily and 100 mg of diclofenac SR once daily. The primary end point was change in 100 mm visual analogue scale (VAS) pain score from baseline and the secondary endpoints were Lequesne index and patients' and investigators' opinion of the therapeutic effect.
Joins demonstrated efficacy that was clinically and statistically non-inferior to that of diclofenac SR, as assessed by primary end point according to predefined non-inferiority criteria. Results from secondary end points were consistent with that of primary end point. All treatments were well tolerated, but out of gastrointestinal adverse events, drug-related adverse events were more frequent in diclofenac SR treatment group than in Joins treatment group (24 cases (19.2%) *vs.* 46 cases (37.1%)).
"Joins three times daily" was well tolerated and demonstrated efficacy that was clinically comparable, according to predefined criteria to that of 100 mg of diclofenac SR once daily in this 4-week study.

[PF1-6] [10/19/2001 (Fri) 14:00 - 17:00 / Hall D]

Drug use evaluation of pediatric TPN based on patients, hospital pharmacists and hospital management

Kim kwi sook°, Lee Hyounjeong, Choi Kyounghee, Ham Gylsun, Sin Yuankuen, Son Inja .

Department of Pharmacy, Seoul National University Hospital

We have made TPN mix for children since 1985. Growing children have specialized needs and require relatively more nutrients than adults, but they have a many limit. For these reasons, many patients was administered TPN by peripheral line.
Inclusion was inpatient starting TPN therapy in SNUH children's hispital for 6 months from november 2000 to april 2001.
Hospitalized children who are growing needs more calories than adults. But it is evaluated that current children TPN regimen can't supply sufficient calories and low protein intake. And TPN monitoring was insufficient.
25% of patients experienced TPN induced complication, for example eletrolite inbalance, cholestasis, liver funtion abnormality, hyperglycemia etc.
TPN mix fee is 1,600 won but it need to be raised 5,000 won and consult fee is 10,000 won but it's cost price is 20,000 won.
Also 10,000 won shoud be established for follow up fee.
Therefore we concluded that fat emulsion adding to normal TPN regimen can fit the need of calories. In addition, continuous patients monitoring is encouraged after TPN to prevent side effect. Central vein nutrition supply shoud be recommended because it is more efficient than peripheral vein nutrition in requirement of calories.

[PF1-7] [10/19/2001 (Fri) 14:00 - 17:00 / Hall D]

The Comparisons of Management of Outpatient's Prescriptions from Medical Institute to Community Pharmacy in the Separation of Prescriptions and Dispensing (Bunup) between Korea and Japan

Park KyoungHo°, Koo BonKi, Son InJa, Orii Takao, Iga Tatsuji

Seoul National University Hospital, Ilsan Baek Hospital, NTT Hospital, Tokyo University Hospital