**Poster abstracts**

**Paediatric Surgery**

**PO-0924b** EFFECT AND SIGNIFICANCE OF ITF ON P38 SIGNALLING TRANSDUCTION PATHWAY IN NEONATAL RAT NECROTIZING ENTEROCOLITIS

1Y Zhao, 2X Fu. 1Department of Pediatric Surgery, The First Hospital of Jilin University, Changchun, China; 2Nursing Department, The Third Hospital of Jilin University, Changchun, China

**Conclusion**

One of the pathogenesis for NEC may be related to intestinal inflammation and protect the mucosa from injury by inhibit- ing P38 signalling transduction pathway, ITF may ameliorate intesti- nal inflammation and protect the mucosa from injury by inhibiting P38 signalling transduction pathway.

**Pharmacology**

**PO-0925** CHILDREN AND YOUNG PEOPLE’S EXPERIENCES OF ADVERSE DRUG REACTIONS AND PHARMACOVIGILANCE IN THE UK

1J Amott, 2H Hesselgreave, 3AJ Nunn, 4M Peak, 5M Pirmohamed, 6RL Smyth, 7MA Turner, 8B Young. 1Health Children’s Nursing Research Unit, University of Central Lancashire; 2Alder Hey Children’s NHS Foundation Trust, Liverpool, UK; 3Centre for Medical Education Research School of Medicine Pharmacy and Health, Durham University, Durham, UK; 4Department of Women’s and Children’s Health Institute of Translational Medicine, University of Liverpool Alder Hey Children’s NHS Foundation Trust, Liverpool, UK; 5School of Health Research and Development, University of Central Lancashire Alder Hey Children’s NHS Foundation Trust, Preston, UK; 6Department of Biostatistics, University of Liverpool, Liverpool, UK; 7Department of Women’s and Children’s Health Institute of Translational Medicine, University of Liverpool, Liverpool, UK; 8Institute of Psychology Health and Society, University of Liverpool, Liverpool, UK

**Background**

Children suffer adverse drug reactions (ADRs) yet there is no research on their experiences and no guidance for practitioners on how to communicate with children and young people in this context.

**Aims**

To investigate children and young people’s experiences of ADRs to inform communication strategies within paediatric settings.

**Methods**

Semi-structured qualitative interviews with children and young people who had experienced a suspected ADR. Interpretive analysis informed by the constant comparative approach.

**Results**

Interviews with 20 children and young people aged 6–18 years suggest variable experiences. Key themes include poor awareness of potential ADRs; feeling frightened and confused by the symptoms of a suspected ADR, and the important role of parents in mediating information about medicines. Children and young people linked symptoms with medicines using temporal association, the absence of a plausible alternative explanations and challenge re-challenge and they described weighing up the risks and benefits of medicines for the future. Children and young people demonstrated a good understanding of the Yellow Card Scheme and wanted to know about, or participate in the reporting of suspected ADRs.

**Conclusion**

Results suggest there is considerable room to enhance communication with children and young people about ADRs. Common ground between how children and young people evaluate ADRs and how parents and clinicians do so suggests a useful starting point. The need for improved communication with parents, who act as mediators, is also indicated. Consideration should be given to how children and young people could be involved in pharmacovigilance for paediatric medicines.

**Pharmacology**

**PO-0926** ARE GROUP ASSESSMENTS SUPERIOR TO INDIVIDUAL AVOIDABILITY ASSESSMENTS? A TEST OF THE LIVERPOOL ADVERSE DRUG REACTION AVOIDABILITY ASSESSMENT TOOL

1LE Braden, 1JC Duncan, 1M Peak, 2J Amott, 3J Kirkham, 4AJ Nunn, 5M Pirmohamed, 6MA Turner. 1Research and Development, Alder Hey Children’s NHS Foundation Trust, Liverpool, UK; 2School of Health, University of Central Lancashire, Preston, UK; 3Department of Biostatistics, University of Liverpool, Liverpool, UK; 4Department of Women’s and Children’s Health Institute of Translational Medicine, University of Liverpool, Liverpool, UK; 5Department of Molecular and Clinical Pharmacology, University of Liverpool, Liverpool, UK

**Background**

There is currently no standardised method for determining avoidability of adverse drug reactions (ADRs) and many of the established tools are not suitable for use in pediatrics. We have developed a new tool; the Liverpool ADR avoidability assessment tool (LAAT). Initial testing showed mixed inter-rater reliability.

**Aim**

To test the hypothesis that group assessments are superior to individual avoidability assessments.

**Methods**

Participants were assigned either to a consensus group or to individually assess avoidability for a purposive sample of 20 ADR cases. Individual participants (nurses, pharmacists and doctors) independently assessed the cases. Groups took part in multidisciplinary meetings to assess the cases and reach consensus. The results were compared to the ‘gold standard’ (the avoidability outcome set by a panel of senior investigators). An