

**EC22 HUMAN AND MATERIAL RESOURCES OF
CLINICAL INVESTIGATION ETHICS COMMITTEES IN
SPAIN**

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Objectives: to assess the material and human resources that Clinical Investigation Ethics Committees (CIECs) are provided with in Spain.

Setting: Clinical investigation Ethics Committees in Spain.

Method: a questionnaire was sent to all CIECs in Spain through e-mail. E-mail addresses were obtained from the Spanish Medicines Agency directory. The questionnaire included a total of 20 questions, relative to material and human resources and relative to the relevance of the CIEC work for the Hospital Management. Material resources included: fax, phone, photocopy, economic compensation for the members or a hall for the meetings. Regarding human resources, questions asked about the existence of technical and supportive staff.

Results: a total of 47 valid questionnaires from 47 CIEC were obtained. Of these 47 CIECs, 5 were autonomic CIEC and the remaining 42 were local. Ten of 17 autonomous communities were represented: Andalucía, Aragón, Castilla-La Mancha, Castilla-León, Catalunya, Illes Balears, Madrid, Navarra, País Vasco and Comunidad Valenciana. Questionnaires were fulfilled by the Secretary in 57% of cases. The administrative work was made by administrative staff in 49% of cases, by the CIECs Secretary in 40% of cases and by technical staff in 11% of cases. Regarding the question of staff and its qualification, 77% of CIECs had administrative staff, versus 21% of CIECs that did not have it; 32% of CIECs had technical staff (clinical pharmacologists, pharmacists, economists and specialists in documentation), versus 64% that did not have this type of staff. For 56% of CIECs, the Hospital Management was not aware of the relevance of the CIEC job; for 58% of CIECs, the Hospital Management was not aware of the CIEC necessities and for 58% of CIECs, the Hospital Management did not provide the necessary resources.

Conclusions: overall, Spanish CIECs are not adequately provided with human and material resources. In almost 60% of cases, CIECs have the perception that Hospital Directions are not aware of the relevance of the CIECs, and consequently they do not provide CIEC with adequate resources. Hospital Managements, central and autonomous administrations should make aware of the relevance of the role of CIECs in order to provide adequate resources .

FEP7 A PILOT STUDY ON ADHERENCE TO PHARMACOLOGICAL TREATMENT versus A BACK SCHOOL PROGRAM FOR CHRONIC LOW BACK PAIN

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Objectives: To evaluate adherence to pharmacological treatment versus a back school program (BS) used as preventive strategy in patients with chronic low back pain, at the end of the school program and after 3 and 6 months.

Setting: Patients referred to the Service of Rehabilitation of a General Hospital between January and February 2004, with a diagnosis of nonspecific chronic low back pain, included in 4 consecutive groups of a BS program.

Method: This was a prospective, open-label observational pilot study. The adherence was measured using the attendance rates to sessions and visits, patient self-reports (Haynes & Sackett test), specific questionnaire (Morisky-Green questionnaire) and physician-estimated adherence. Measures of disease activity, pharmacological treatment and demographics (age, sex, socio-cultural status, etc) were also obtained.

Results: Forty patients (77,5% females) with a mean age of 46,2 years (SD:13,2; range 20–74) were studied. Of these, 34 (85%) had