



PHARMACEUTICAL INTERVENTIONS ON DIRECT ORAL ANTICOAGULANTS IN EMERGENCY DEPARTMENT

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BACKGROUND AND IMPORTANCE

Reviewing high risk medication prescriptions, such as Direct Oral Anticoagulation (DOAC) is a high priority strategy

AIM AND OBJECTIVES

Analyze number and type of pharmaceutical interventions related to DOACs at Emergency Department (ED) and evaluate degree of acceptance by physicians

MATERIAL AND METHODS

- Prospective, longitudinal, observational study
- ED Pharmacist reviewed DOACs prescriptions Monday to Friday
- Period: June-September 2024

- DOAC's review was collected in pharmacy electronically prescription program
- All ED interventions were orally or electronically communicated to prescribers



Data collected: age, sex, home prescription, ED prescription, intervention required and degree of acceptance of pharmacist recommendations

RESULTS

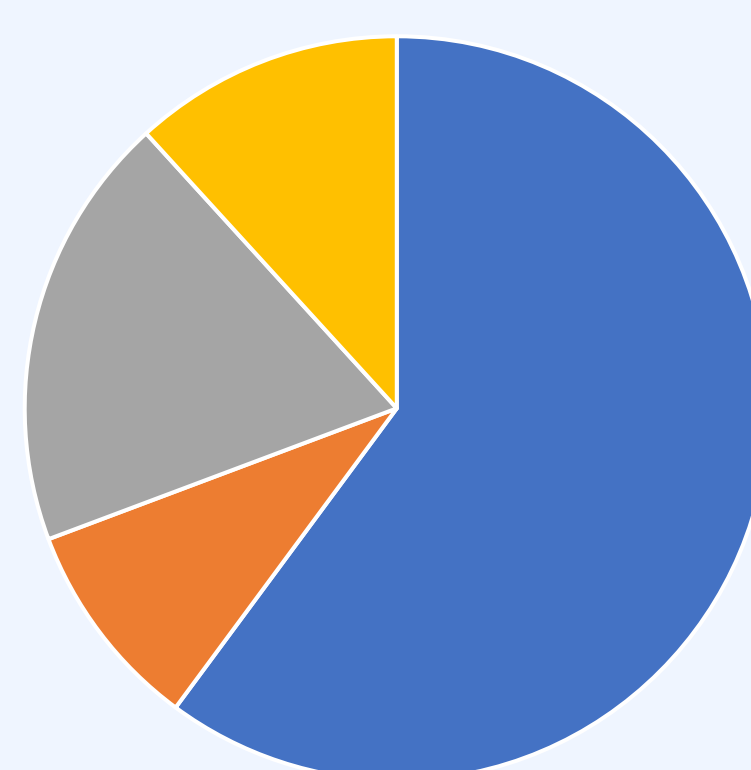


153 PATIENS

Median age: 82 years
(range 42-97)



51.6%
(N=79)



DOACs PRESCRIBED

- APIXABAN: 60,1% (N=92)
- DABIGATRAN: 9,2% (N=14)
- EDOXABAN: 18,9% (N=29)
- RIVAROXABAN: 11,8% (N=18)

PHARMACEUTICAL INTERVENTION DOACs PRESCRIPTION 18.9% (N=29)

RENAL FUNCTION ADJUSTMENT

62,1% (N=18)

DOSE ADJUSTMENT: WEIGHT AND RENAL FUNCTION

6,9% (N=2)

DOSE ADJUSTMENT PERFORMED NOT NECESSARY

10,3% (N=3)

CONTRAINDICATION: LIMIT RENAL FUNCTION

6,9% (N=2)

ACTIVE BLEEDING

3,5% (N=1)

HOME SUSPENDED DOAC PRESCRIBED

6,9% (N=2)

NASOGASTRIC TUBE CONTRAINDICATION

3,5% (N=1)

Accepted interventions
62,1% (N=18)

Non- accepted interventions
24,1% (N=7)

Non-evaluated
(length of stay <24h)
13,8% (N=4)

CONCLUSION AND RELEVANCE

18,9% of patients had an **incorrect DOAC prescription** during their **ED stay**. The most frequent **intervention** is related to **dosing** and these were accepted by physicians.

Pharmacist should be part of a multidisciplinary team and can contribute improving patients' safety.

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