

Comprehensive assessment of pharmacotherapy in the complex chronic patient as a security strategy

Acosta-Cano C.¹, Muñoz-García M.¹, Delgado-Silveira E.¹, Molina-Mendoza L.¹, Zamorano-Serrano M.², López E.C.³, Greciano Greciano V.³, Álvarez-Díaz A.¹.

¹Pharmacy Department. Hospital Ramón y Cajal, IRYCIS. Madrid. Spain. ² Emergency Department. Hospital Ramón y Cajal. IRYCIS. Madrid. Spain. ³ Primary Care East Assitencial Direction . Madrid Community. Spain

Background and importance

Complex chronic patients have changing needs that require **continuous reassessment**. Care transition makes pharmacotherapeutic review and reconciliation fundamental to **find discrepancies** and **ensure the safety** of these patients.

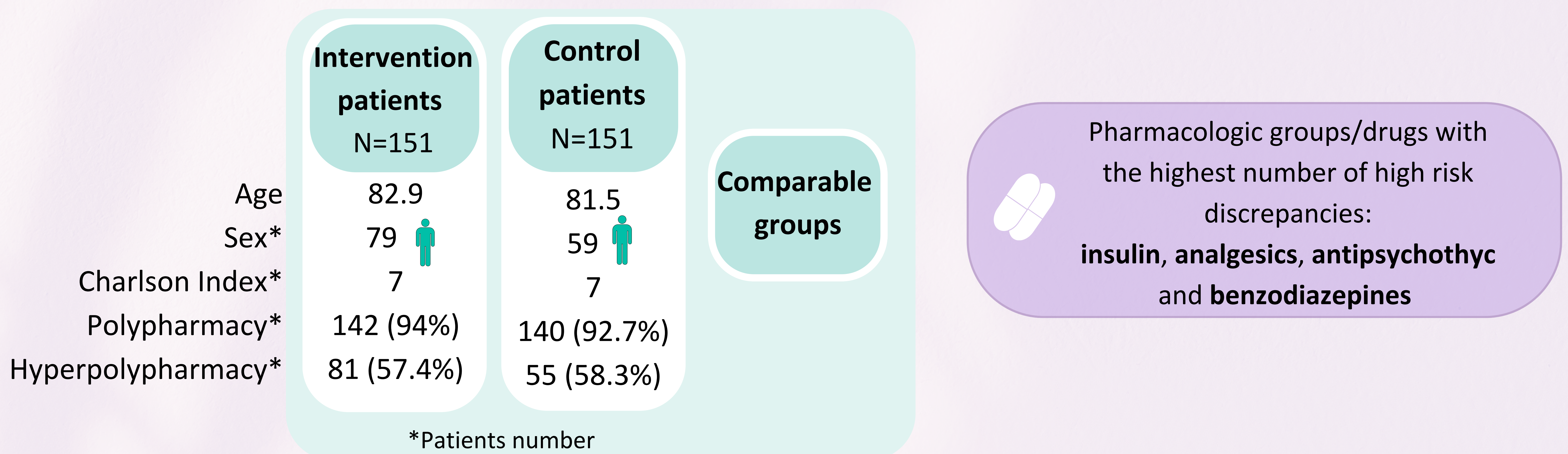
Aim and objectives

To analyse a comprehensive pharmacotherapy assessment program (CPAP) impact in the number of discrepancies and high risk discrepancies at discharge between groups, intervention patients and control patients, who had medication list in the discharge report in order to compare with the electronic prescription.

Materials and methods

Prospective intervention study in the emergency department of a tertiary hospital between **01/09/2023-11/30/2023**. **Inclusion criteria:** Complex chronic patients who consulted emergency department and were not institutionalized or palliative. CPAP was performed in <24 h/48h in the emergency department that included: conciliation, review of pharmacotherapy and issue of a pharmacotherapeutic recommendations report.

Results



Of the patients who were discharged and had medication list in the discharge report:

	Intervention patients N=96	Control patients N=82	p
Patients with discrepancies	74 (77.8%)	70 (85.4%)	
Number of discrepancies	256	326	p=0.02
Discrepancies/patient	3.46	4.66	
Patients with high risk discrepancies	41 (55.4%)	47 (57.3%)	
Number of high risk discrepancies	53	78	p=0.005
High risk discrepancies/patient	1.29	1.66	

Conclusion and relevance

- In **more than half of the patients** there are **discrepancies** between treatment described in the discharge report and their electronic prescription, which is a **safety problem**.
- There are statistically significant differences between groups showing that **CPAP can reduce the number of patients with discrepancies** and **high risk discrepancies**.
- **Most drugs with the highest number of high risk discrepancies were nervous system related.**

