TIME TO PERFORM MEDICATION RECONCILIATION AT ADMISSION IN A NEUROLOGY UNIT: COMPARISON BETWEEN PROACTIVE AND RETROACTIVE PROCESSES

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BACKGROUND

Medication reconciliation (MR) at admission is a multidisciplinary process which aims to ensure hospital prescription. MR consists in obtaining the complete and accurate list of medications taken by the patient at home, the best possible medication history (BPMH), then using BPMH to ensure the medication order.
Two approaches are possible: retroactive when BPMH is produced and taken into account after the prescription is written; proactive when BPMH is produced before and is taken into account in the initial prescription. Proactive MR is promoted as a safer approach, but the lack of human resources is often presented as a major limiting factor to set it in practices.

The purpose of this study :

- Comparaison of the total duration between the two modes of MR (pharmacist's view).
- Comparaison of the impact in the health care of the patient (physician's view).

MATERIALS & METHODS

- Admission in the Neurology Unit
- Patients **> 65 y.o**
- June 2018 -March 2019

Criteria for inclusion

2 groups created (1:2)

- **Proactive** MR
- **Retroactive** MR

- Review of patient's information from several sources (Patient, Pharmacy…)
- Meeting with the physicians

Implementation of the best possible medication history (BPMH)

Analysis medication discrepancy (MD)

2 types:
- Intentional (IMD)
- Unintentional (UMD)

Quality of first prescription

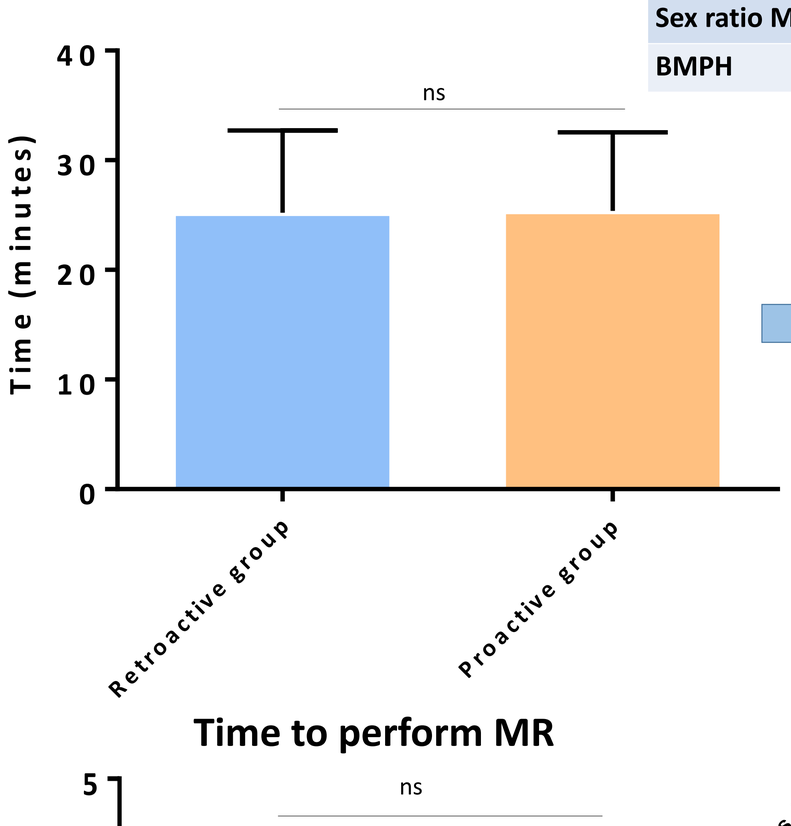
- Delay between the patient 's admission and the end of the MR

Analysis of process time

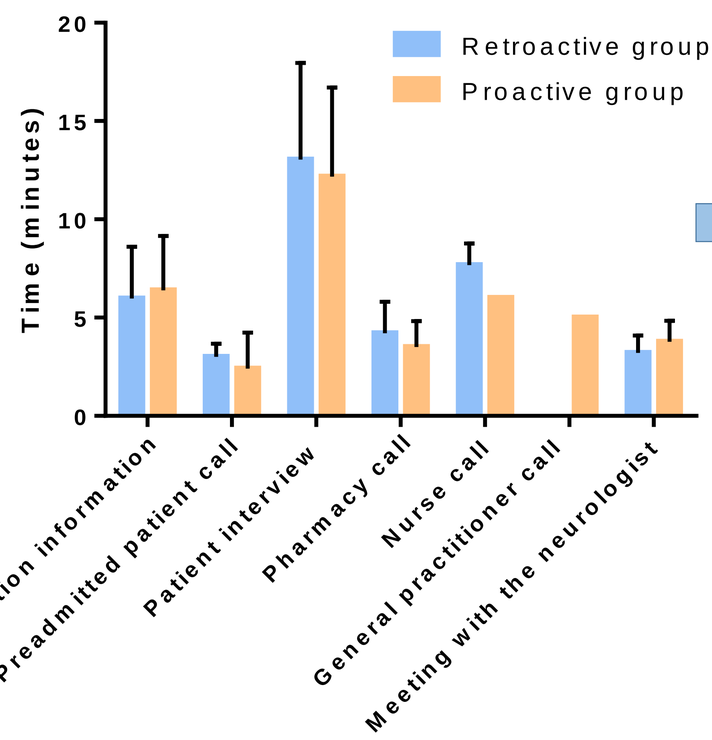
MR duration

RESULTS

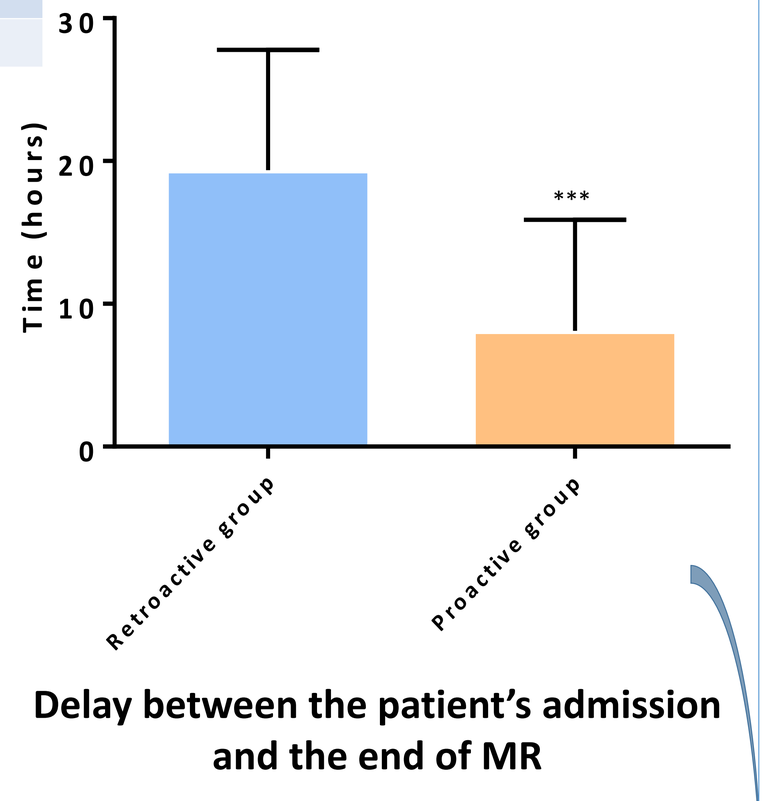
n_{total} = 205 patients	Proactive MR	Retroactive MR
Number of patients	67	138
Age	71,7 ± 4.1 y.o	72,1 ± 3.7 y.o
Sex ratio M/F	1.0:1.2	1.0:0.8
BMPH	6,7 ± 3.8 drugs	6,7 ± 4.1 drugs



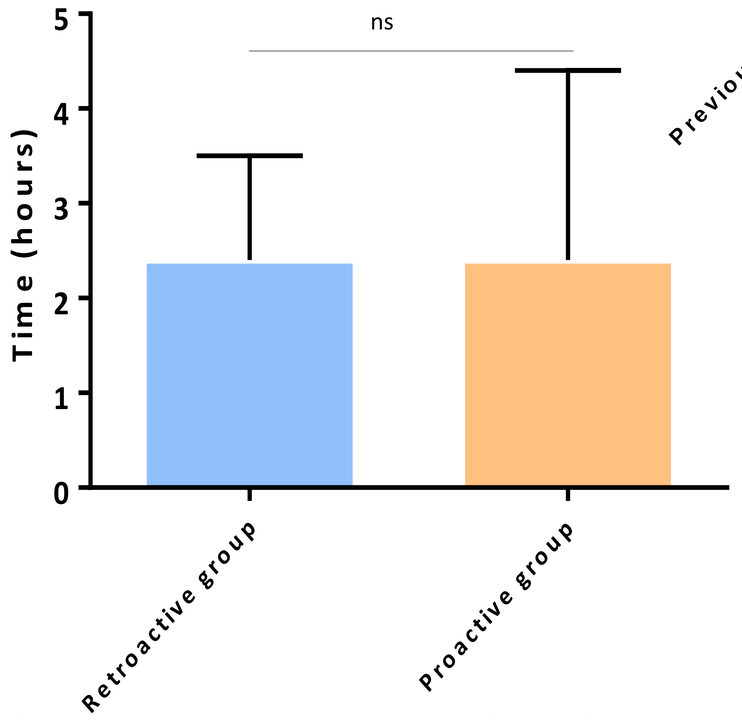
Time to perform MR



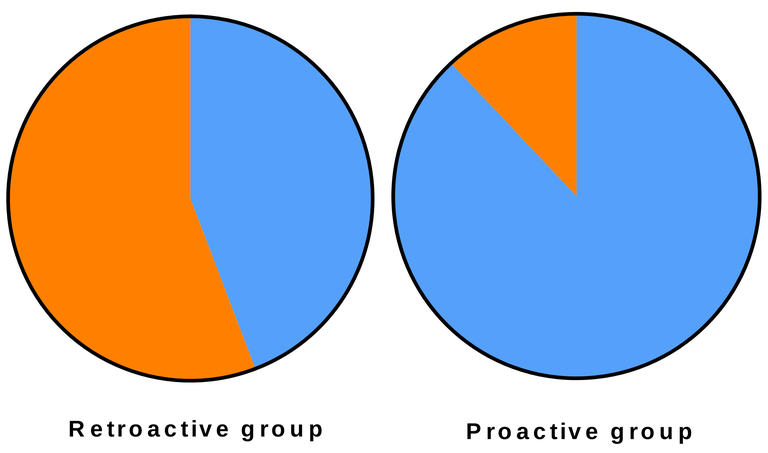
Time to perform the different processes

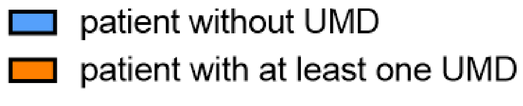


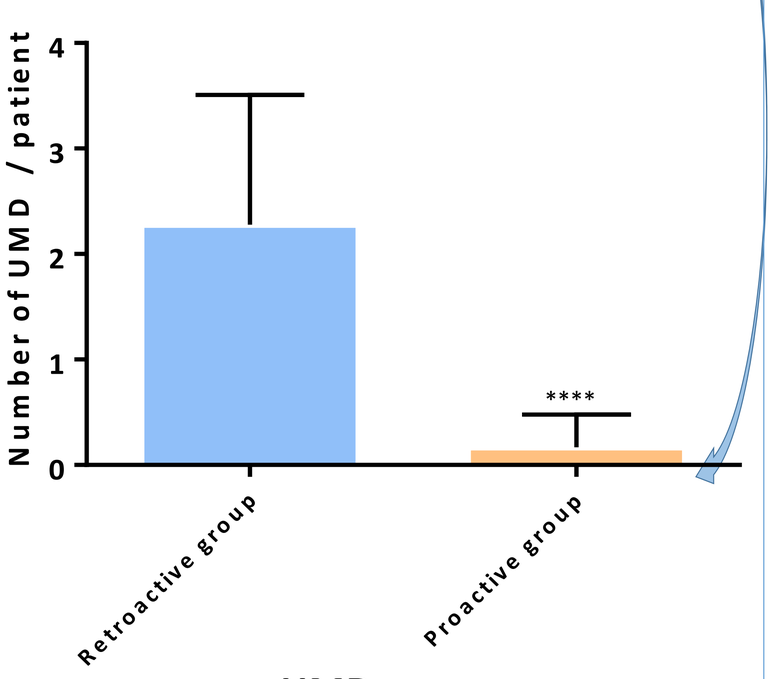
Delay between the patient's admission and the end of MR



Delay between admission and the first prescription







UMDs

CONCLUSION

Thus, we have highlighted in a neurology unit that the proactive MR was faster than the retroactive MR.
Moreover, the safety of the patient was improved without impacting the delay of prescription order.