MEDICATION RECONCILIATION IN AN EMERGENCY DEPARTMENT

TOMÁS LUIZ A, ALMANCHEL RIVADENEYRA M, RUIZ GÓMEZ A, SAEZ GARRIDO M, GARCÍA MOLINA O.

Hospital Clínico Universitario Virgen de la Arrixaca, Pharmacy Department, Murcia, Spain.



Background:

- Medication errors lead to higher morbidity, mortality, and expenditure.
- The likelihood of mistakes is higher in Emergency Departments.

Purpose:

To determine the incidence, the type of discrepancies and reconciliation errors (RE) upon admission to an Emergency Department, and the drugs involved.

Methods:

- Prospective observational study, including patients admitted to the Emergency Service pending hospitalization, during 3 weeks (9-27 April 2018).
- Program coverage indicator, quality prescription indicators and medication reconciliation process indicators were calculated.

The variables collected were:				
Sex & age	Type of RE detected according to the Consensus Statement of the SEFH* and drugs involved.			
Number of	Number of discrepancies:			
home	- Justified by the patient's clinical evolution (DJ).			

medications - Not justified requiring clarification (DNJ).

*Spanish Society of Hospital Pharmacy

•The medication reconciliation process (MRP) was carried out through a clinical interview with the patient/caregiver, and the data obtained from the electronic clinical history and the primary care electronic records.

Results:

- MRP was performed in 61 of the 216 patients admitted (coverage rate of 28.24%).
- The 55.74% were men, with an average age of 70.61 ± 14.86 years (72.13%> 65 years).
- The median of home medications was 8 [range 1-18].
- 93 discrepancies were detected, of which 22.58% were DJ, while the remaining 77.42% were considered DNJ.
- The quality indicators of the prescription were determined, obtaining the following results: 57.38% patients with RE, 42% medications with RE, and 1.20 RE per patient.
- Regarding quality indicators of the MRP, the detected RE were 58.33%, and were classified into: 37 (88.10%) medication omissions, 4 (9.52%) dose errors, and 1 (2.38%) wrong medication.

The drugs involved were:

Number	Drug	Number	Drug	Number	Drug
19 (45.24%)	Lipid modifying agents	5 (11.90%)	Antidepressants	4 (9.52%)	Thyroid hormones
4 (9.52%)	Drugs used in benign prostatic hyperplasia	2 (4.76%)	Antipsychotics	2 (4.76%)	Anti-glaucoma drugs and miotics
2 (4.76%)	Insulins & analogues	1 (2.38%)	Beta-blocking agents	1 (2.38%)	Digitalis glycosides
1 (2.38%)	Organic nitrates	1 (2.38%)	Vitamin D & analogues		

Conclusions:

The RE affected more than half of the patients admitted to the Emergency Department, the most prevalent discrepancy was the omission of medication and the drugs most implicated were statins.



