

ANALYSIS OF POTENCIALLY INAPPROPRIATE PRESCRIPTION IN A NURSING HOME



Rodríguez Jorge M, Sánchez del Moral R, García Giménez I.
Hospital Universitario Juan Ramón Jiménez, Pharmacy Department. Servicio
Andaluz de Salud. Distrito sanitario Huelva-Costa, Primary Care Pharmacy.
Huelva. Spain.

5PSQ-086

BACKGROUND AND IMPORTANCE

Potentially inappropriate medication prescription can increase the risk of adverse drug reactions (ADRs). Therefore, multiple tools have been developed to detect inappropriate prescriptions. STOPP (Screening Tool of Older Person's Prescriptions) /START (Screening Tool to Alert to Right Treatment) criteria is one of them.

AIM AND OBJECTIVES

To analyse inappropriate prescriptions (IP) or the need of potential prescriptions in polymedicated institutionalized patients in order to improve patients safety.

MATERIAL AND METHODS

A descriptive, transversal study was performed in September 2022. We included all polymedicated residents (>6 drugs) of a nursing home attached to a Pharmacy Department. Data collect were age, sex, number of medications/resident and drugs prescribed. STOPP/START criteria v.2. was applied to detect inappropriate prescriptions or the need of potential treatment. Data were collected from electronic prescription programme ATHOS-Prisma and computerised medical record Diraya.

RESULTS

50 patients were included
66% men
Median age: 73 years (range: 69-83)
Average drugs prescribed by residents: 10 (6-21)

STOPP CRITERIA

Seventy-two percent of the residents (36) presented at least one criteria

Total IPs were 142, with an average of 5 IPs per resident (0-7)

Most prevalent:

- Treatment duration longer than defined (72%)
- Prolonged use (> 4 weeks) of benzodiazepines (72%)
- Drugs that adversely affect fallers (most related to benzodiazepines) (72%)
- Prescription of two drugs within the same class (22%)

START CRITERIA

23 residents (42%) presented any prescription initiation criteria

The total potential prescribing omission were 26, with an average of 1 per resident (0-2).

The most common were:

- Use of laxatives in patients with opioid treatments (47,8%)
- Vitamin D supplements in older patients (34,8%).

CONCLUSION AND RELEVANCE

STOPP criteria was the most frequently found. The majority related with inappropriate duration or duplicity of benzodiazepin treatment.

For START criteria, the indication of laxatives for patients receiving opioids on a regular basis was the most frequent potential prescribing omission.

The use of STOPP/START criteria could improve patients safety, which are able to detect the inappropriate prescription of some drugs in addition to the omission of potential indicated medication.

