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BACKGROUND AND IMPORTANCE

Proper management of chronic medication in surgical patients is essential to ensure their safety during hospitalization.



Pharmaceutical intervention
(integrated into the multidisciplinary team)

Is key to medication reconciliation upon admission

Postoperative pharmacotherapeutic follow-up performed by the pharmacist is essential to assess and adjust the usual chronic treatment according to the patient's new clinical situation, especially in those with comorbidities such as hypertension or diabetes mellitus.

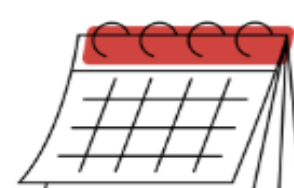
AIM AND OBJECTIVES

To evaluate the impact of pharmaceutical intervention in optimizing the perioperative management of home medication in surgical patients during hospitalization.

MATERIAL AND METHODS



Prospective, longitudinal study in a tertiary level hospital



January 2024-August 2025



The pharmacist carried out daily clinical follow-up to optimize home treatment by **adjusting the dosage, after reviewing the blood pressure and blood glucose values** in hypertensive and/or diabetic patients.

Table 1. Variables to study

Demographic		Clinical	Safety
Age	Sex	Nº Chronic medications	Adequacy treatment
Length of stay	Clinical service	Pharmacotherapeutic objectives	Clinical impact pharmaceutical intervention

RESULTS

363 patients



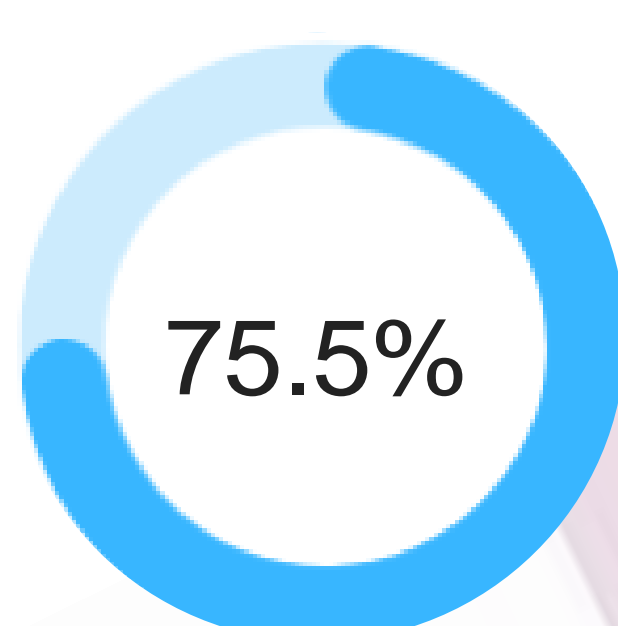
59.2%



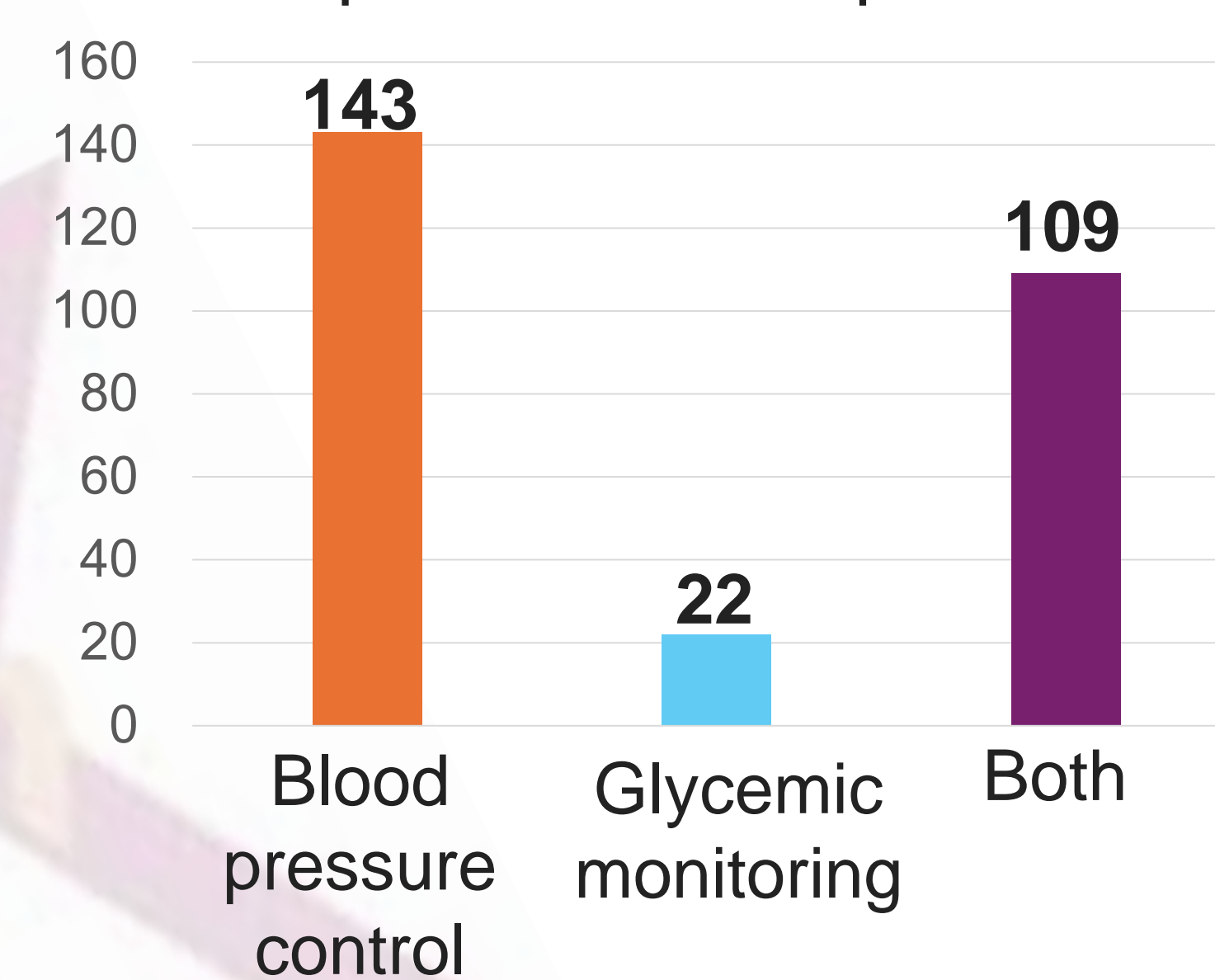
40.8%

- Mean age: 71±14 years
- Hospital stay: 7±7 days
- Treatment: 7±4 chronic medication

Screening and need for follow up

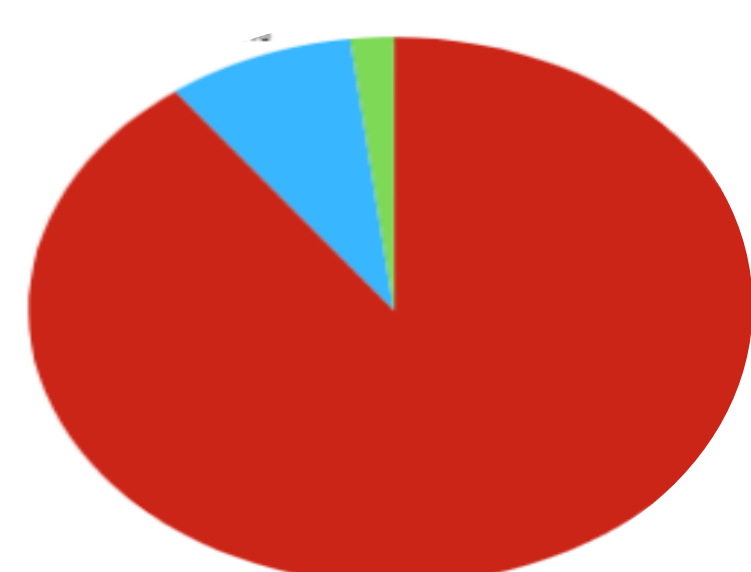


Patients pharmacotherapeutic follow-up



Clinical services

Neurosurgery 8.4%
Urology 1.9%



Orthopedic Surgery and Traumatology 89.8%

Intervention and clinical impact



31.3%(86) dosage adjustment of antihypertensive or insulin



58.1%(50) corrected parameters



41.9%(36) consultation with the Internal Medicine Service, due to clinical instability

CONCLUSION AND RELEVANCE

Pharmaceutical intervention, integrated within the multidisciplinary team, ensures proper reconciliation and optimization of perioperative management of chronic medication in surgical patients during hospitalization.

