Pharmaceutical interventions after detection of non-handling medications in patients with dysphagia

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What was done

Analysis of interventions for the adaptation of pharmacological treatment in nursing home (NH) patients with dysphagia.

How it was done

- Observational, retrospective and descriptive study in two NH.
- Data collected from 06/2023 to 09/2023.
- Variables collected: Biodemographic data, prescribed medications and the suggested interventions using the DEGLUFARM® guide.

Proposals notified:



Change active ingredient (52%)



Change pharmaceutical form (43%)



Withdrawing (negative benefit-risk) (4%)

What is next

Most of the proposals involve changes in active ingredients, so further clinical monitoring is recommended.

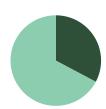
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Why was done

Geriatric community is the main group of patients affected by dysphagia. The manipulation of pharmaceutical forms can compromise the drug's safety and efficacy.

What was achieved



184 NH patients

60 patients with crushed medications (32.61%)



68.3%

MEDIAN AGE: 86

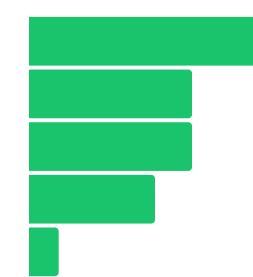


509 oral medications. Mean: 9 drugs/patient



23 conflicting drugs in 20 patients (33.33%)

Pharmaceutical forms that sholudn't be crushed:



- 8 Retard tablets (35%)
- 5 Gastroresistant tablets (22%)
- 5 Retard capsules (22%)
- 4 Coated tablets (17%)
- 1 Gastrorresistant pellets (4%)

Conflicting drugs (ATC classification):

