

PHARMACEUTICAL INTERVENTIONS IN PATIENTS UNDER CHRONIC OPIOID TREATMENT ADMITTED TO TRAUMATOLOGY UNITS

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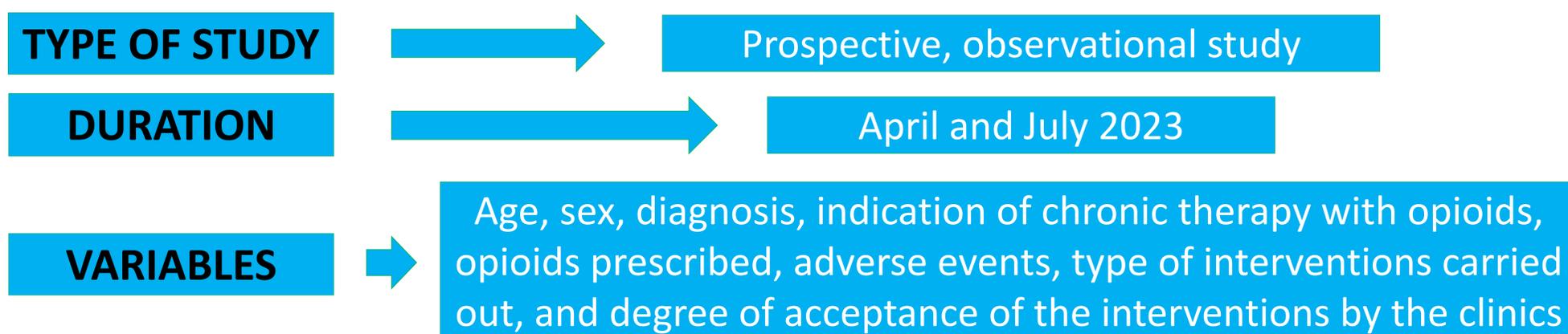
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BACKGROUND AND IMPORTANCE

Opioid analgesics are considered high risk medications. Their growing use in patients with non-oncological chronic pain has increased in recent years, making it important to review the appropriateness of the prescriptions in order to minimize the risk of adverse events.

AIM AND OBJETIVES

The objective of the study was to analyze pharmaceutical interventions carried out in hospitalized trauma patients already receiving chronic treatment with opioids at the time of admission.



RESULTS

- ❖ Total poblacion 596 patients. 34 patients interventions (73,5 % women). Mean age of 73,5 [62.5-81.5] years
- ❖ 45 interventions were carried out.
 - 76 % accepted.
 - 52 % fentanyl patches.

INTERVENTIONS	DRUGS
53,3 % reconciliation errors	Fentanyl (53,13 %)
20 % inappropriate prescription of two or more opioids	Tapentadol (21,9 %)
17,8 % dosage errors	Morphine (20,3 %)
8,9 % risk of respiratory depression due to comorbidity and/or concomitant medications	Oxycodone naloxone (3,1 %)

CONCLUSION

- ❖ Prescription review by pharmacists allowed us to detect and avoid numerous errors in treating trauma patients who receive chronic opioids to treat non-oncologic pain, leading to safer use of these medications.