ROLE OF THE PHARMACIST IN INTERNAL MEDICINE: ANALYSIS OF PHARMACEUTICAL INTERVENTIONS DURING A ROTATION IN AN INTERNAL MEDICINE DEPARTMENT

MEROÑO-SAURA MA[1], PACHECO-LÓPEZ P[2], FERNÁNDEZ-ZAMORA C[2], CLAVIJOS-BAUTISTA S[2],. NÁJERA PÉREZ MD[2]

[1]HOSPITAL PERPETUO SOCORRO, PHARMACY, MURCIA, SPAIN.

[2]HOSPITAL GENERAL UNIVERSITARIO MORALES MESEGUER, PHARMACY, MURCIA, SPAIN.

Background and importance

Change in the performance of hospital pharmacists:

-Increasing their participation in the pharmacotherapeutic process of patients

- Inclusion in the multidisciplinary team.

Aim and objectives

Quantification and analysis of pharmaceutical interventions carried out by a pharmacist in an Internal Medicine Service.

The analysis of pharmaceutical interventions was carried out prospectively over 10 weeks. The pharmacist accompanied the doctors during their visit.

eahp

4CPS-350

Variables: Characteristics of the patients, number of interventions, type of interventions and acceptance of the interventions. Interventions that generated changes in the prescription were considered “accepted”, those that were rejected “not accepted”.

Results

39 patients were visited. Mean age of 81 years (39-95)

Reason for admission: **respiratory** (25.65%), heart failure, kidney problems and low back pain (10%).

Median of 7 **comorbidities**, highlighting **arterial hypertension** (66.67%), and were **polymedicated** with a median of 9 drugs.

During the study period, 108 interventions were performed.

38 (35.16%) adequacy of treatment.	18 (16.66%) reconciliation of medication	9 (8.33%) sequential therapy.	9 (8.33%) nutritional advice
6 (5.56%) substitutions by therapeutic equivalents	5 (4.63%) deprescription of drugs of low therapeutic utility.	5 (4.63%) modifications in the duration of treatment	4 (3.70%) detection of therapeutics duplications.
4 (3.70%) management of medications not included in the pharmacotherapeutic guide.	3 (2.78%) drug detection without justification.	3 (2.78%) dose adjustments for renal or hepatic failure.	2 (1.85%) incomplete prescriptions.
1 (0.93%) detection of drug interactions	1 (0.93%) detection of allergies.		

95% of the prescriptions were accepted, of these 95% implied changes in the medical prescription.

Conclusion and relevance

The integration of the pharmacist in the Internal Medicine Service facilitates the detection, prevention and resolution of errors related to medications and a more appropriate treatment on admission to hospital or discharge from home. Most of the interventions were accepted.