

C.Henry¹, C.Roseau¹, A.S.Dumenil², F.Mercier², A. Rieutord¹, S.Roy¹

(1)Pharmacy department, (2)anaesthesia intensive care : Antoine Béclère Hospital, GH-HUPS, Clamart, FRANCE

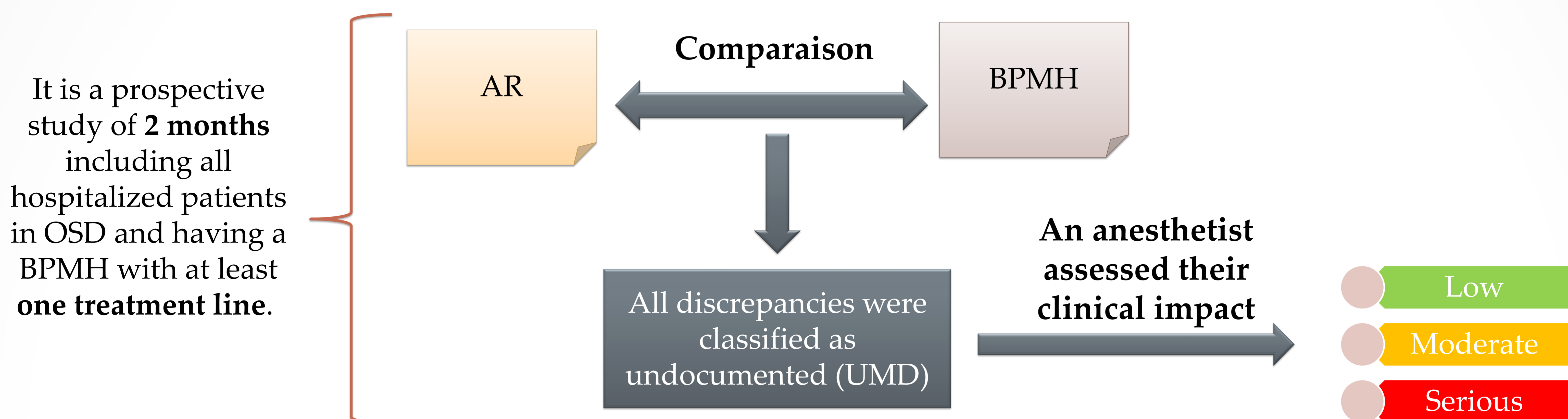
Introduction

For seven years, the orthopedic surgery department (OSD) has benefited from the **Best Possible Medication History** (BPMH). The BPMH aim was to assist surgeons to maintain good prescribing practices. However, they still preferentially used **anaesthesia report** (AR) to prescribe.

Purpose

The main purpose of this study was to identify **unintended medication discrepancies** (UMD) between BPMH and AR regarding their type, number and clinical impact.

Method



Results

Population : patients = 98

| | Mean ± sd |
|-------------------------------------|-------------|
| Age (years) | 72,1 ± 14,3 |
| Number of treatment line | 6,7 ± 3,5 |
| Length of stay (days) | 9,7 ± 6,3 |
| Admission type (elective/emergency) | 50/48 |

32% of the BPMH were available within 24 hours following patient admission-and 69% within 48 hours.

Classification and clinical impact of UMD

AR : 533 treatment lines
BPMH : 658 treatment lines

260 UMD for 72 patients (73,5%)
UMD mean = 2,7/patient

| | Low | Moderate | Serious |
|----------------------|------------------|-----------------|-----------------|
| Omissions | 102 | 38 | 12 |
| Posology differences | 16 | 17 | 3 |
| Missed Posology | 17 | 6 | 6 |
| Addition | 15 | 7 | - |
| Others | 7 | 10 | 4 |
| Total | 157 (60%) | 78 (30%) | 25 (10%) |

The mainly concerned therapeutic classes were :
 ✓ nervous system (35%),
 ✓ alimentary tract and metabolism (27%)
 ✓ cardiovascular system (18%)

Conclusion

This study highlights the fact medication reconciliation at admission has an **important clinical impact** in a surgery unit. The AR remains mainly used by the surgeons to establish prescriptions because of its generally **earlier availability**. However, our results suggest the need to proceed to the medication reconciliation process reengineering **to improve the collaboration between pharmacist and anesthetist**.