

Acceptance of pharmaceutical interventions in drug dosing in renal disease

CP-170

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Background

A drug adjustment programme for patients with renal disease was started in 2013 in our hospital.

In this system, information from the electronic prescription programme is linked (using an Access application) with information sent by the laboratory (creatinine) and with a list of drugs that may require renal adjustment. Afterwards, an adjustment warning for the physician is added to the electronic prescription programme.

Purpose

To assess the acceptance by the physicians of pharmaceutical interventions in drug dosing in renal disease.

Material and methods

This prospective descriptive study was conducted in a tertiary university hospital with 1,200 beds. The study period was 39 days (from January 21st to March 20th, 2014).

The pharmaceutical interventions were recorded during daily practice.

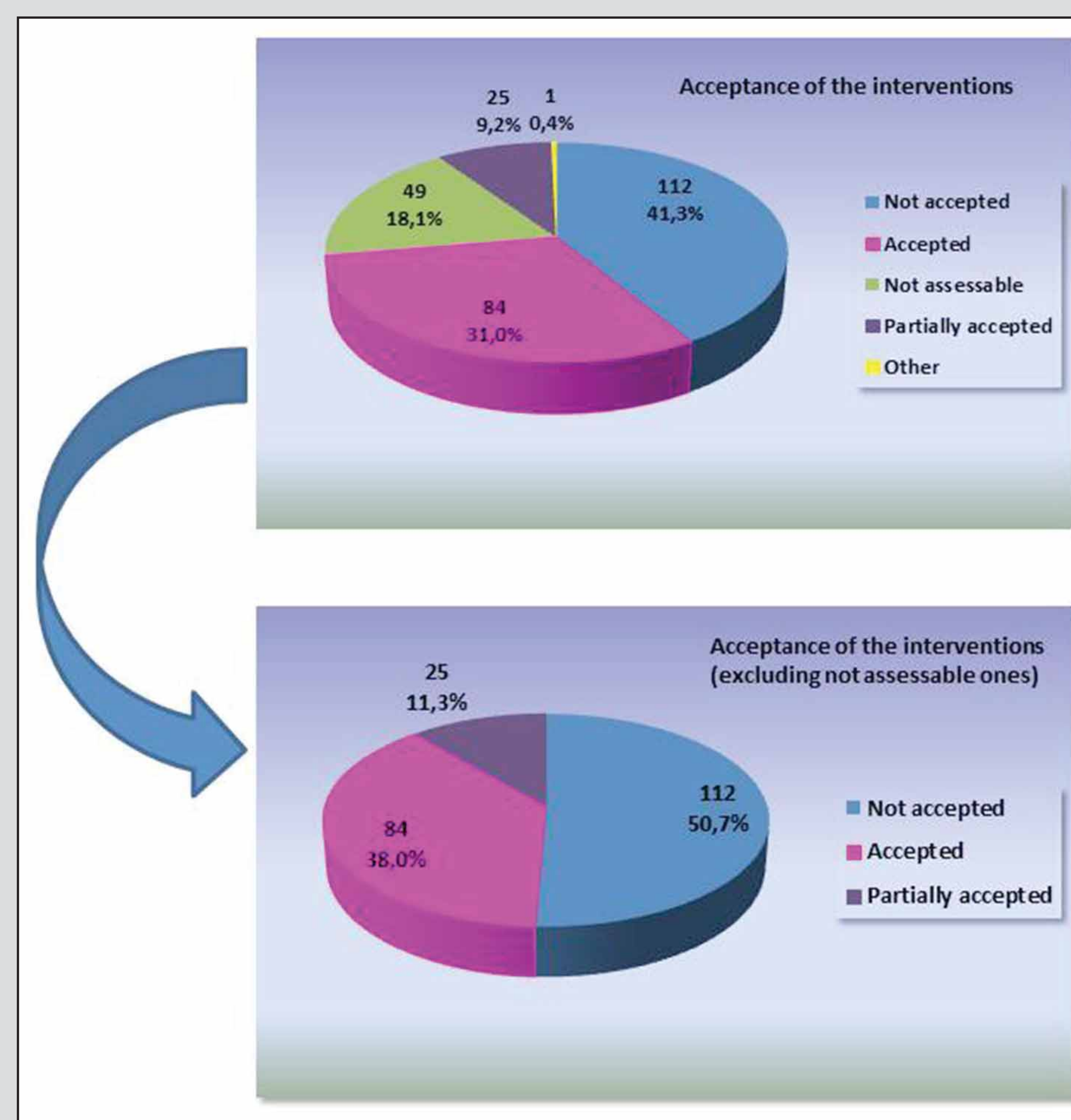
The following data were collected: date of pharmaceutical intervention, clinical chart number, medical service, age, sex, creatinine, glomerular filtration rate, adjusted drug, adjustment warning.

Finally, the degree of acceptance of these interventions by the physicians was reviewed.

Results

During the study period, 153 patients (mean age 75.3 years, 78 male and 75 female) were included and 271 renal adjustment interventions were performed (mean: 7 interventions per day).

The degree of acceptance of the interventions was: accepted 84 (31.0%), partially accepted 25 (9.2%), not assessable 49 (18.1%), not accepted 112 (41.3%) and other (not an appropriate intervention) 1 (0.4%). Excluding not assessable and inappropriate interventions (finally 221 interventions), the result was: accepted 84 (38.0%), partially accepted 25 (11.3%) and not accepted 112 (50.7%).



Conclusions

The acceptance of pharmaceutical interventions by the physicians is approximately 40%, which is relatively low.

One of the reasons of this low acceptance could be the location of the adjustment warning.

Finally, it is necessary to consider what could be done to improve the acceptance of this type of pharmaceutical interventions.