

ANTICOAGULANT THERAPEUTIQUE EDUCATION: A NEW MORE SUCCESSFUL METHOD?

S. Dupont^{1*}, F. Letreguilly¹, I. Vella¹, M. Luyckx¹
¹ Pharmacy department, Denain Hospital, France

INTRODUCTION

More than 1% of the French population is treated with anticoagulants. This class of medication is the first cause of iatrogenic. It's the reason why anticoagulant therapeutic education (ATE) is a priority for our hospital. Since 2010, an ATE programme has been implemented in the cardiology department but only a few patients have been interviewed so far. Our goal was to find a new method which would be more effective to treat the patient and also easier to implement for the pharmacist, who is in charge of informing the health staff.



MATERIALS & METHOD



Since all the patients' records are computerised, we have worked with the computing department to include the ATE programme in the patients' records.



We start by asking questions to the patients under treatment. Then, we explain to them what the treatment consists in and we give them an explanatory booklet which informs them about the signs of overdose, the risky situations and the adverse effects. It also provides them with information regarding their diet and the steps they have to follow when forgetting a dose.



We call the patients one month after the interview was carried out to assess the results.



RESULTS/DISCUSSION

The new method has been implemented since March 2012. Among the 12 patients we had interviewed, 8 patients answered our questions and 2 of them had stopped their treatment. The 6 patients still under treatment know that the treatment follow-up requires to take blood tests. 4 of them know what to do in case of an abnormal INR result. 3 out of the 6 patients keep in their wallet the card which indicates they are under treatment. All the patients take their medication at fixed times in the evening. They appear to be satisfied by the programme. The booklet helps them to memorise in the long run the notions they were explained. Including the ATE in the patients' computerised records proves to be easier for the pharmacist. The presentation of the process to the managers from the different departments was a success.

CONCLUSION

These encouraging results highlight the advantages of this new therapeutic education method which makes the pharmacist's work easier. We plan to implement ATE in all the departments and to assess this implementation in the next six months.