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GASTROPROTECTIVE AGENTS IN THE EMERGENCY ROOM OF A TERTIARY-LEVEL HOSPITAL

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background

Gastroprotective agents are widely used in both inward and outward settings, and they are generally perceived as safe drugs

purpose

To analyze the prescription of anti-ulcerous drugs in the Emergency Room (ER) in accordance with their approved indications, and the economic impact of their inappropriate utilization.

methods

Indications of use of proton-pump inhibitors (PPI) and H₂-antagonists (via Spanish Medicines Agency): gastro-duodenal ulcers (including NSAIDs and steroid-related ulcers), reflux oesophagitis, Zollinger-Ellison's syndrome, and *Helicobacter pylori* eradication. Inclusion criteria: patients >65 years-old on at least four home medications and an anti-ulcerous prescription in the ER. Pharmaceutical interventions were registered and their degree of acceptance calculated. The cost resulting from drug misuse was calculated considering a mean stay in the unit of one day.

results

Patients: 111, 70.2% male, median age 78.9 years-old [65-94]. 94.6% of patients (92.9% PPI, 1.7% H₂-antagonists) received gastro-protection upon presentation (95.5% of them were prescribed *de novo*), with intravenous pantoprazole as the agent mainly involved (82% of cases).

29.7% of prescriptions did not meet the indications, while this percentage decreased to 12.5% upon floor admission. The pharmaceutical interventions were accepted in 16.2% of cases. Monthly, the cost estimation from the off-label use was €1850.

conclusion

Gastro-protection in the ER did not meet the criteria in nearly 1/3 of patients. This contrasted with the poor acceptance of the pharmaceutical recommendations of discontinuation. The rationale might be the so-perceived harmless profile of these drugs with the short-term use. The rate of off-label prescriptions dropped to half upon floor admission, likely due to a thorough-revising by the prescriber. Since only patients at a higher risk of suffering from a medication-related problem were included, the cost resulting from the misuse of anti-ulcerous was probably under-weighted. In conclusion, forthcoming Pharmacy policies should focus on improving the adherence of both widespread and expensive drugs, given their economic and health-care impact.