

IMPLEMENTATION OF A PHARMACEUTICAL CARE PROCESS IN PATIENTS WITH ANEMIA AND CHRONIC KIDNEY DISEASE IN TREATMENT WITH ERYTHROPOIESIS STIMULATING FACTORS



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BACKGROUND

We have implemented a process of pharmaceutical care in the pharmacy hospital in patients with anemia and chronic kidney disease in pre-dialysis patients in treatment with erythropoiesis stimulating factors (ESF), due to ongoing safety reviews and reports published in the last years.

PURPOSE -

Assesing the follow-up of the pharmacy care process.

MATERIALS AND METHODS

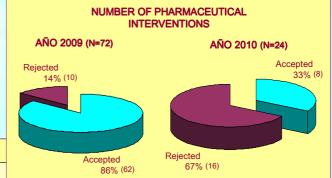
We have put in place two transverse courts for 7 months in 2009 and 2010, including 100 % of sensitive patients.

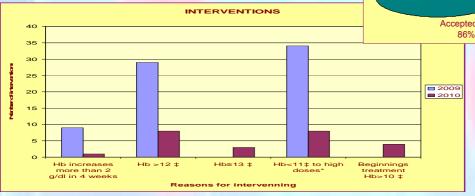
The information was recorded in the Dispensation of Silicon® (Grifols) Program.

If Hemoglobin (Hb) levels were maintained between 10 and 12 g/dl, treatment was considered to be effective.

RESULTS

Year	2009	2010
Number of patients (N°p.)	100	79
N°p. insufficient monitoring of clinical information	31 (31%)	17 (21,5%)
Effective treatment	20	39







REASONS FOR INTERVENNING NUMBER OF INTERVENTIONS /YEAR			RECOMENDATIONS	
	2009	2010		
Hb increases more than 2 g/dl in 4 weeks	9	1	- Changing dose or frequency of ESF administration	
Hb >12 g/dl	29	8		
Hb≥13 g/dl	0	3	Discontinuing drug, for safety.	
Hb<11 g/dl to high doses*	34	8	Discontinuing, Inefficiency	
Beginnings treatment Hb>10 g/dl	0	4	Not beginning	

^{*} Epoetin alfa doses > 300 Units/kg / week or darbepoetin alfa > 1,5 μg/kg/week. ‡= Hb levels (g/dl)

CONCLUSIONS :

- >A decrease in the number of patients treated with ESF and the need of interventions was observed. (2010 vs 2009)
- >Accepted interventions were fewer also (2010 vs 2009), probably due to an increase in awareness when complying with the recommendations, motivated by the follow-up.
- > It was showed that medical checks were not too close, involving an insufficient monitoring of clinical data and difficulty to establish the effectiveness of many treatments.
- >This data will be reported to Nephrology Department in order to implement possible solutions.