



NURSES' NEEDS FOR A PRACTICAL BASIC TRAINING ON ANTITHROMBOTIC DRUGS IN A UNIVERSITY HOSPITAL

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Background

In less than ten years, 2 antiplatelet agents and 4 direct oral anticoagulants (DOAC) were released in Europe making antithrombotic therapy management more complicated. Nurses' formation is mandatory since they play an everyday role in patient's management and education.

Objective

Evaluate knowledge about antithrombotic therapy among the approximately 2000 nurses of our hospital in order to provide adapted additional training.

Material and methods

A form including a set of 71 questions in 16 themes, all related to antithrombotic drugs and their management, was prepared.

It was distributed by the head nurses:

- To all nurses of Heart Institute (Group A, N=101).
- Then to nurses of other volunteer services (Group B, N = 657).

Nurses were free to return it to the junior pharmacist. No ethical approval was requested.

Results

Population and Response rate

→ June - August 2014 :

Group A, 49 nurses of cardiology (response rate = 49.0%)

→ November 2014 - August 2015:

Group B, 170 nurses of 38 others services (response rate = 25.9%)

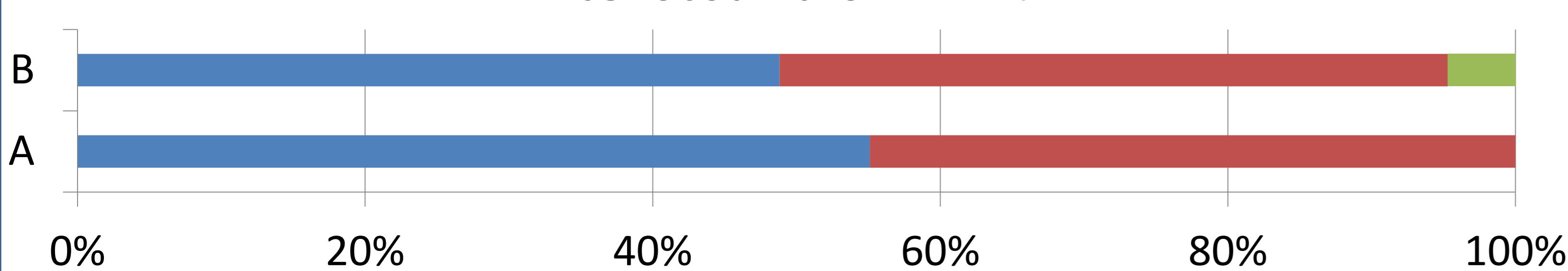
- 35% from intensive care units,
- 65% from adult conventional units.

Legend

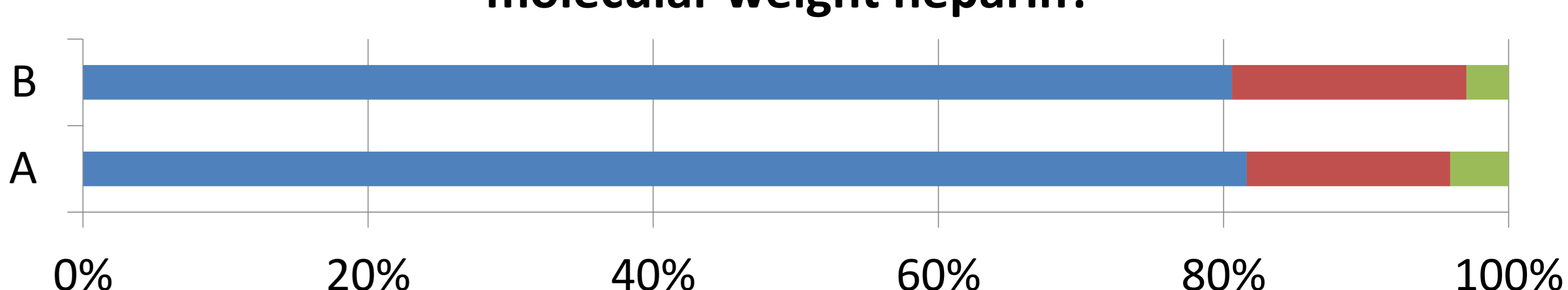
- Right Answer
- False Answer
- No Answer

State of knowledge about drugs

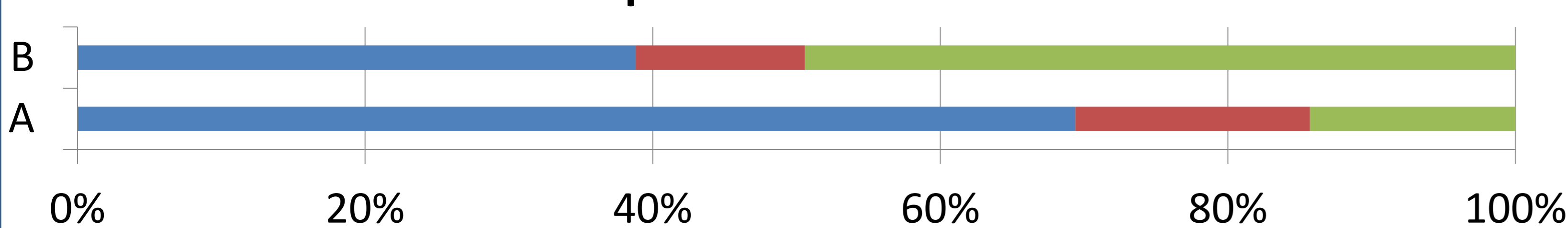
Acenocoumarol = VKA?



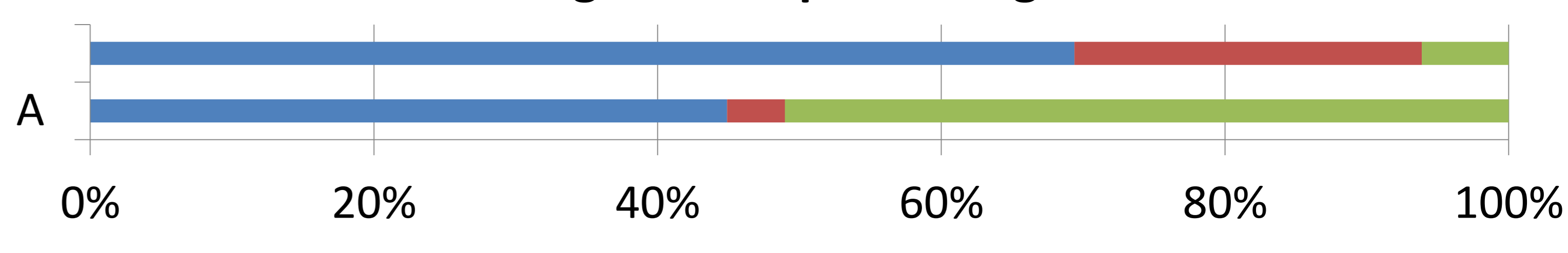
Difference between heparin calcium and low molecular weight heparin?



Apixaban = DOAC?

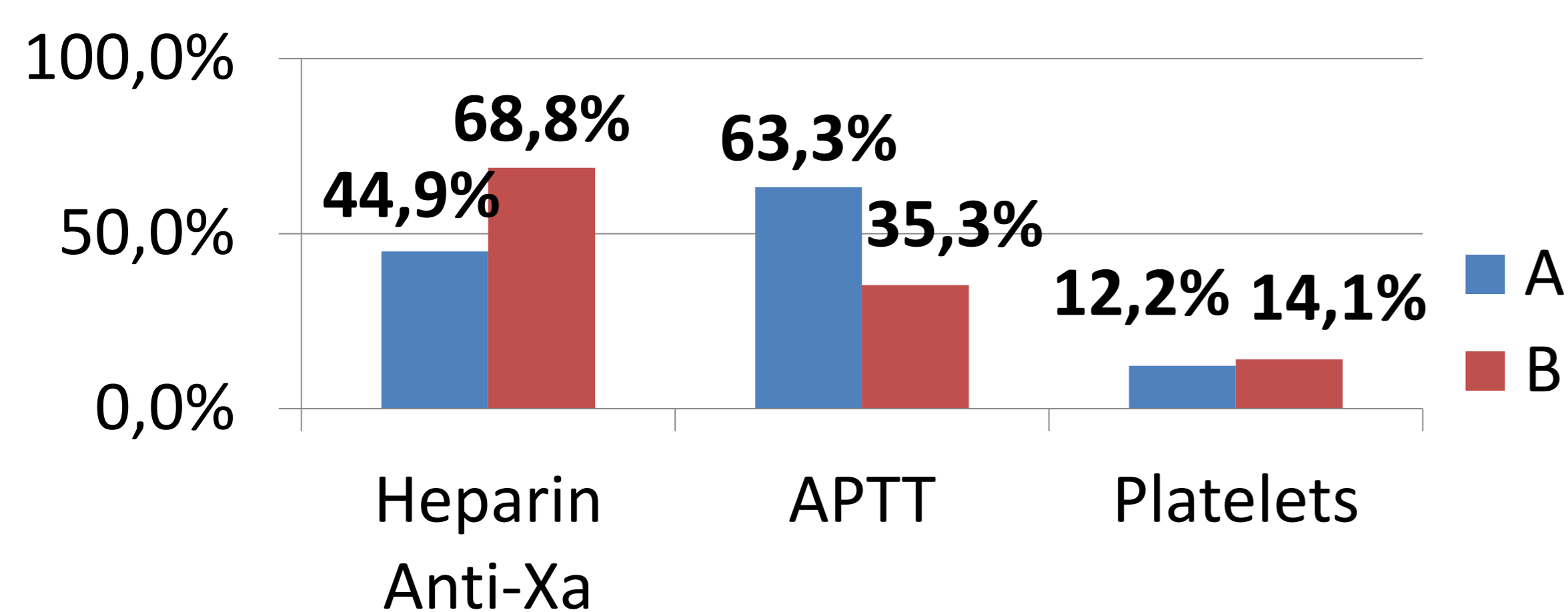


Prasugrel = antiplatelet agent?

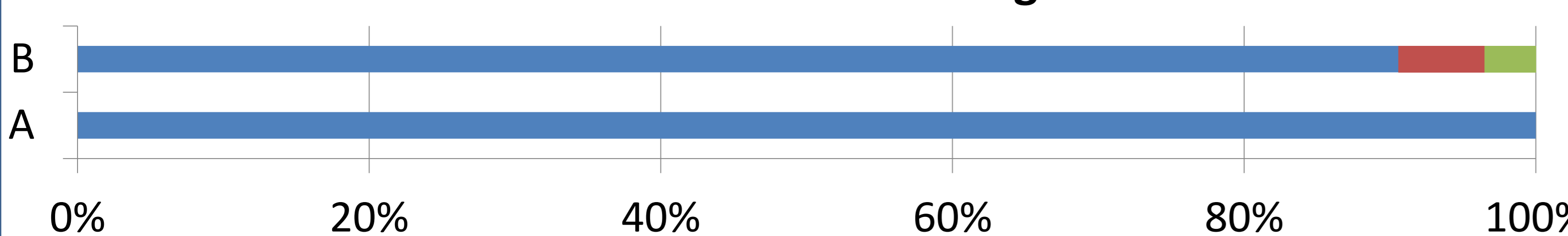


Knowledge about monitoring

UFH monitoring needs

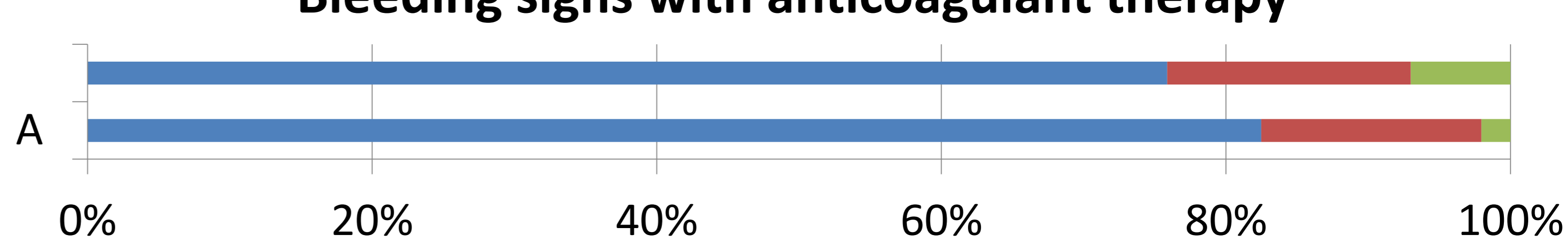


INR in VKA monitoring



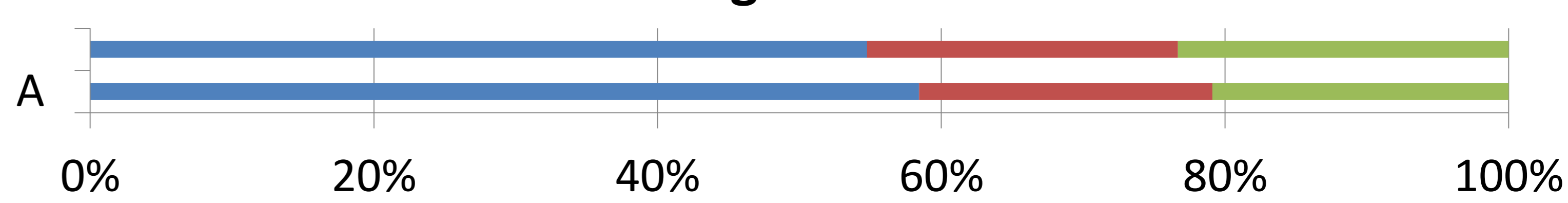
Knowledge about bleeding signs

Bleeding signs with anticoagulant therapy

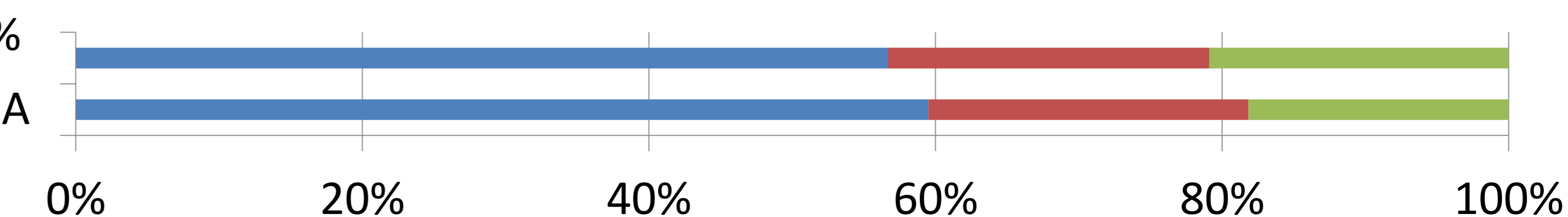


Knowledge about risk factors

Bleeding risk factors



Thrombosis risk factors



Discussion

No better knowledge about older vs recent drugs in either group. Both groups are more familiar with monitoring of VKA than of UFH.

Unfortunately, none of the VKAs marketed in France could be identified: for example the acenocoumarol, which is less known than Apixaban, could not be identified as a VKA by approximately 50% of nurses.

Approximately 90% of nurses still don't know the importance of platelets dosage in UFH monitoring.

Conclusion

These results were helpful to design a nurse's one-day practical basic training seminar on antithrombotics in our hospital and where training will be provided interactively with clinical cases and exchanges between caregivers and trainers.



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