

6 months after the implementation of a Good Practice Form (GPF) : the example of Versatis

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What was done and why

Versatis is a lidocain patch used in post-zona neuropathic pains (PZNP). Following an alert in June 21 by the **OMEDIT** (**O**bservatoires du **M**edicament, des **D**ispositifs médicaux et de l'**I**nnovation **T**hérapeutique) concerning an overuse in our hospital, a **GPF** (**G**ood **P**ractice **F**orm) was created, in collaboration with the local treatment pain comity and distributed around the hospital in September 21. After a while, the hospital pharmacy observed a majority of pertinent off label prescriptions.

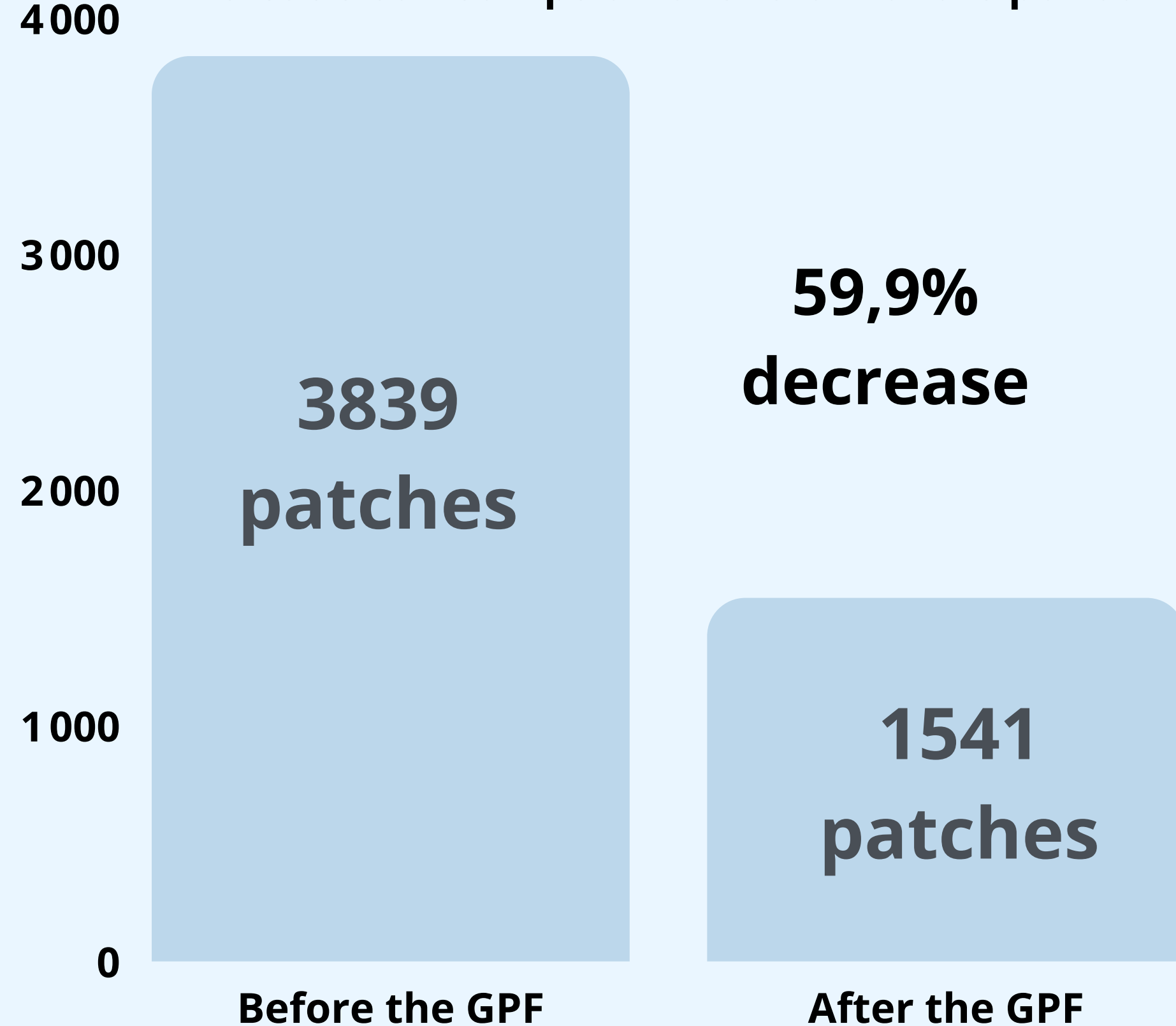
Did the implementation modified prescriptions and consumption ?

How was it done ?

- Analysis of nominative dispensations between 09/21 to 02/22
- Consultation of shared electronic patient records
- Medical evaluation of prescriptions by rheumatology and pain-management physicians
- Methodological strategy validated by a PPR (Professional Practice Reviewer) physician

What was achieved ?

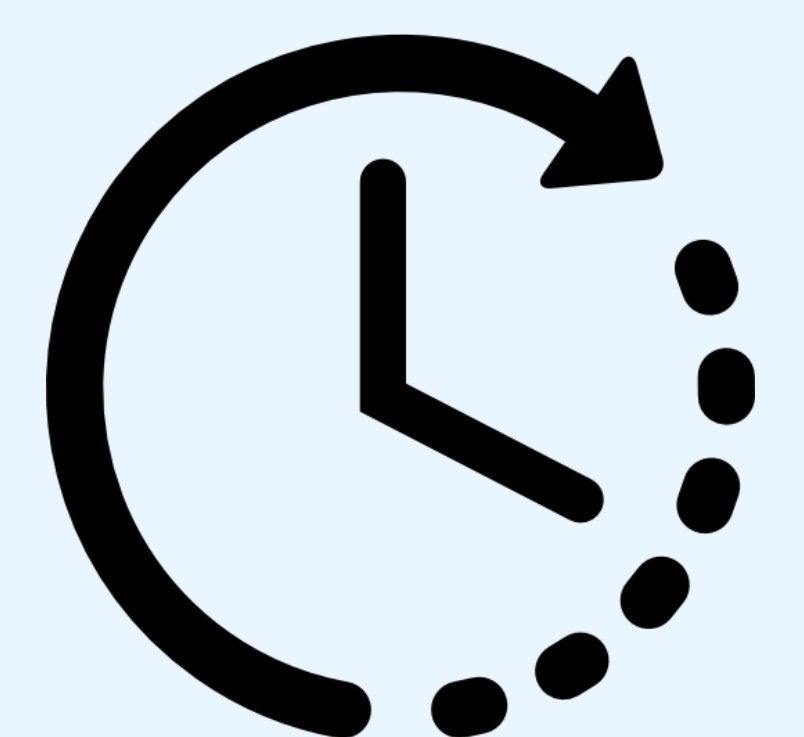
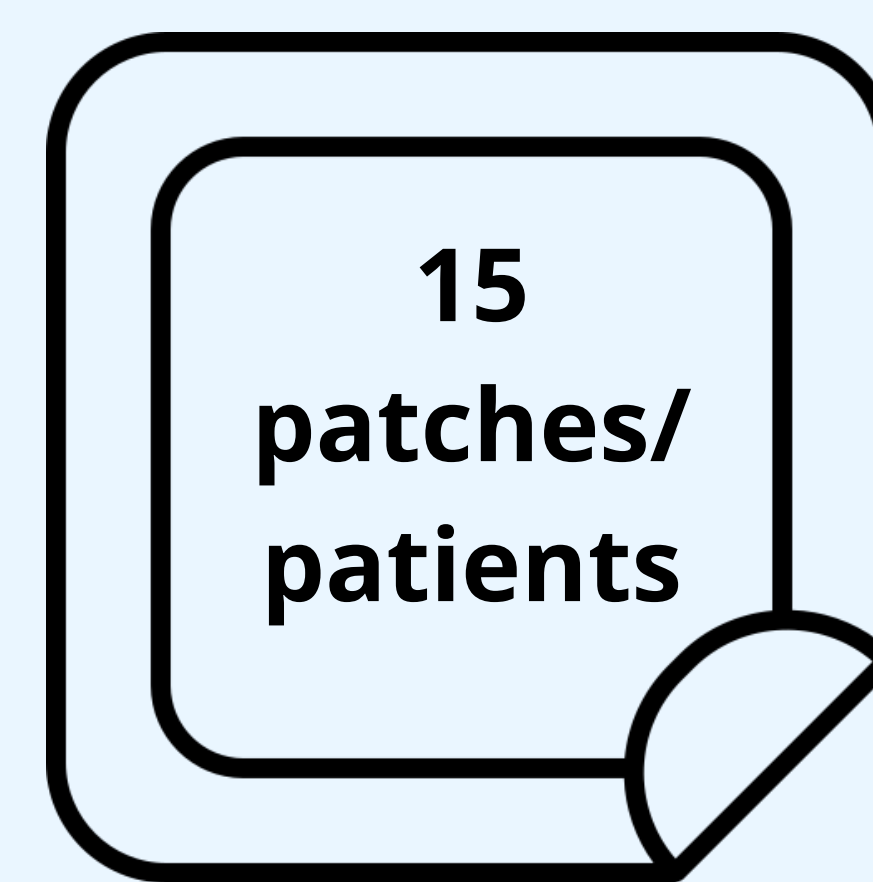
Versatis consumption over a 6 months period



106 patients



Medium age
64 years



14,4 days of
treatment

Off label prescriptions

Pertinent (3 criterias)

Neuropathic pain with localised allodynia
max 1 patch

- 36% checked for neuropathic pain
- 9% with allodynia
- 4% 1 patch/zone/day.

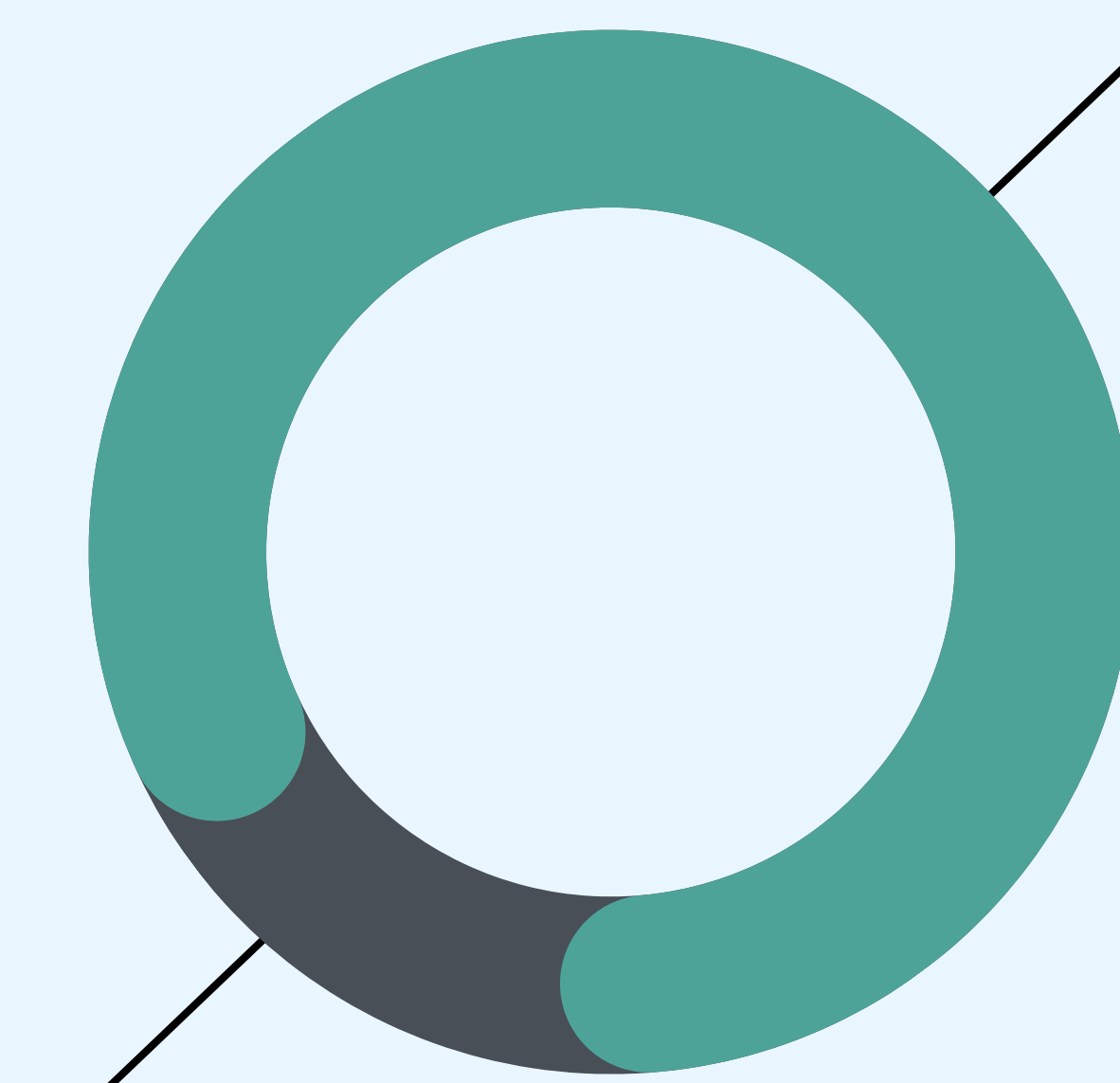
10 patients benefited rheumatological or pain-management consultations.

Unjustified (post medical expertise)

- 1,8% by lack of information
- 0,9% in case of post-gout crisis pain



97 GPF archived
→ 91,5% of use



In label prescriptions
PZNP with localized allodynia
13,2%

In term of **prescription's conformity**:

- 48% of total prescriptions respected the 12/24h rest-time
- 79% of total off label prescriptions respected the limit of 1 patch/zone/day

What is next ?

Despite the patch's small price, the implementation were significantly impactful over the hospital's consumption (and by extension, PHEV non evaluated), with an use over 90% by prescriptors. Although the **off-label prescription majority**, they were considered pertinent over 90%. the GPF will be optimized since this evaluation, particularly enhanced with the definition of **allodynia**.

