



# ELECTRONIC COMMUNICATION OF DISCONTINUATION OF HOME TREATMENT PRESCRIBED TO PATIENTS IN A TERTIARY LEVEL HOSPITAL.

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## Background and importance

Despite its apparent benefits, electronic prescribing systems still face numerous challenges. Without effective electronic communication between prescribers and pharmacists, medication may be dispensed incorrectly, resulting in patients harm.

## Aim and objectives

To determine potential errors in the prescription of home medication, preventively suspend this medication and alert the prescribing physician so that the error can be solved.

## Material and methods

Prospective cross-sectional study  
October 2022 to May 2023

**Main variable:** Potential errors in electronic prescriptions.

**Errors and reasons for suspension of treatment.**

- Incorrect dosage (1)
- Treatment completed and not discontinued (2)
- Incorrectly withdrawn treatment (3)
- Interventions carried out in which the deadline for modification of the interventions by the prescribers expired (2 weeks) (4).
- Incorrect presentation (5)
- Therapeutic duplicity (6).

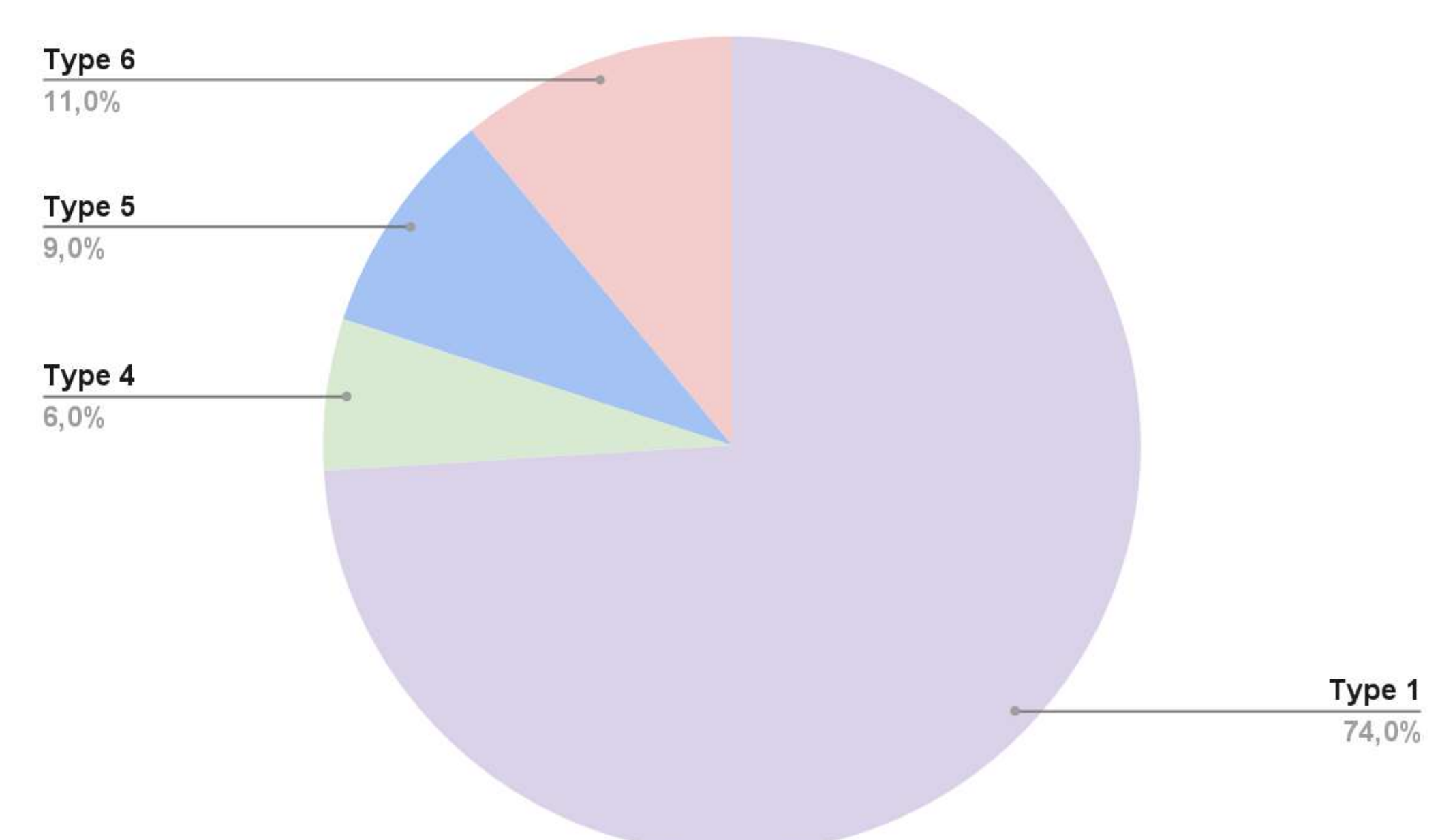
**Other variables.**

- Treatments and medical services involved.
- Average number of days between the detection and notification of the error and its resolution.

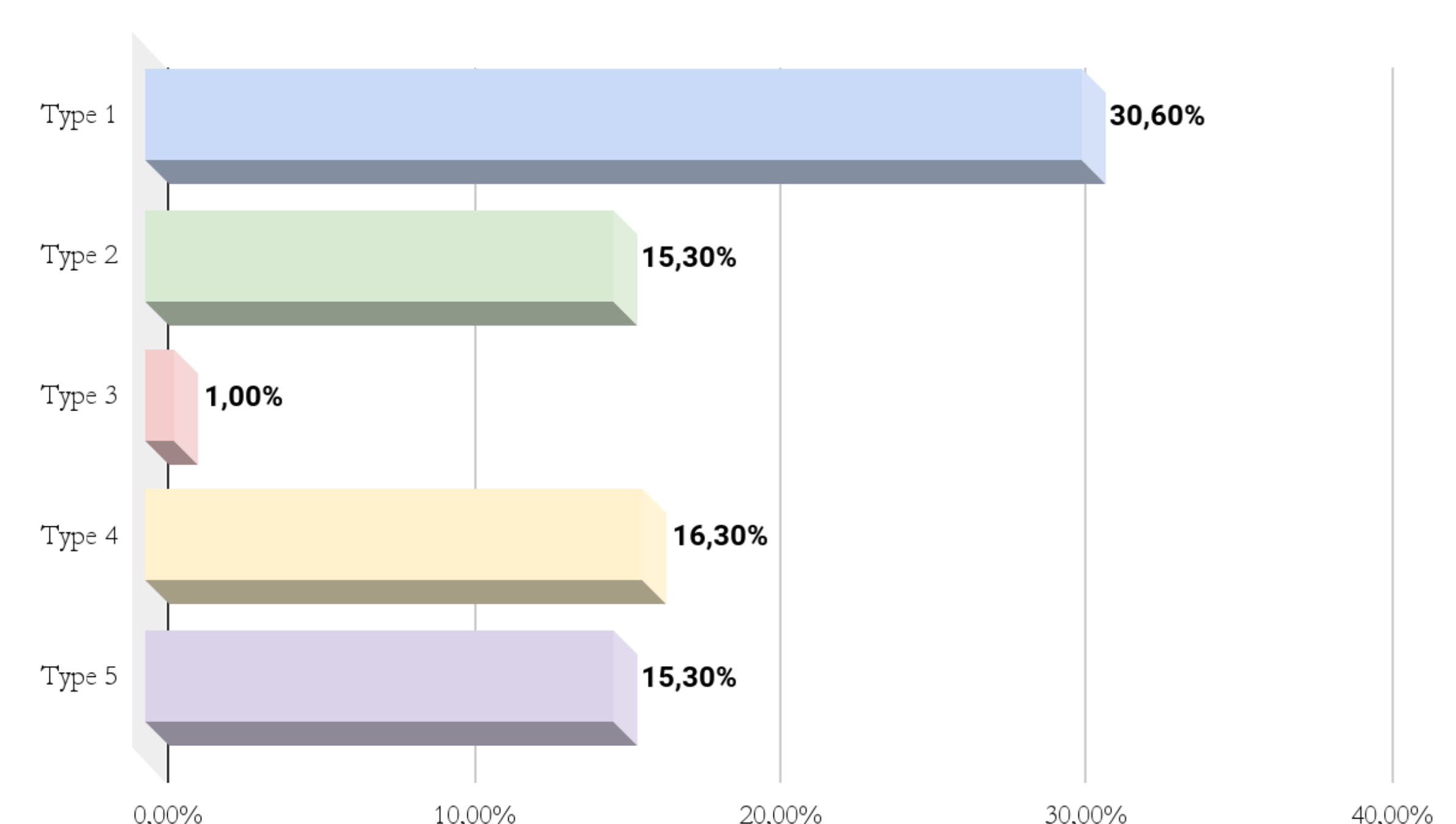
## Results

- 340 potential home prescribing errors ➤ 190(55.9%) were real.
- 98 (51.58%) women with median age of 63[20-73].
- 81 patients (42.63%) were polymedicated with 10 drugs and 34(41.97%) had at least 15 or more drugs prescribed.
- Average number of treatments was 8[4-13].
- Most frequent errors were detected semaglutide(28.5%), triptorelin (15%), methotrexate(12.5%, ), denosumab(9%), aledronic (9%), leuprorelin(5%), dulaglutide(5%), ibandronic(4.7%), risedronic(3%), paliperidone(3%) and aripiprazole(2.5%)
- Medical specialties involved: rheumatology(31%), endocrinology (28.5%), cardiology (10%), oncology(7.3%) and urology (7.3%).
- An average of 7 [4-11] days was observed between precautionary annulment and correction of the error.

**Causes of preventive discontinuation of treatment.**



After the intervention, 98 treatments (51.57%) were discontinued for various reasons.



## Conclusions and relevance

Electronic communication of discontinuation of home treatment is an important functionality with potential to decrease adverse events due to medication errors and also to reduce costs for the healthcare system and for polymedicated patients.