



# VITAMIN D PRESCRIPTION IN COMPLEX CHRONIC PATIENTS AND PHARMACEUTICAL INTERVENTIONS TO TRATMENT OPTIMIZATION

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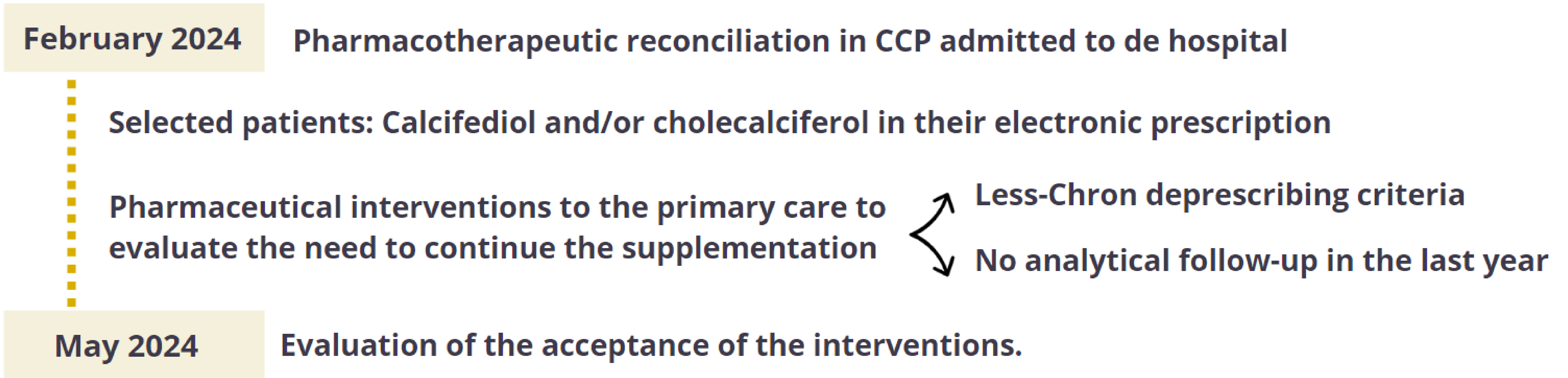
## Background and importance

Some studies have shown unjustified increase in vitamin D supplementation, despite potential risks of adverse events.  
Current guidelines advise evaluating the benefit-risk ratio and considering deprescribing when needed.

## Aim and objectives

Evaluate the vitamin D prescriptions in complex chronic patients (CCP) and assess the acceptance of pharmaceutical interventions carried out in primary health care to optimize treatment.

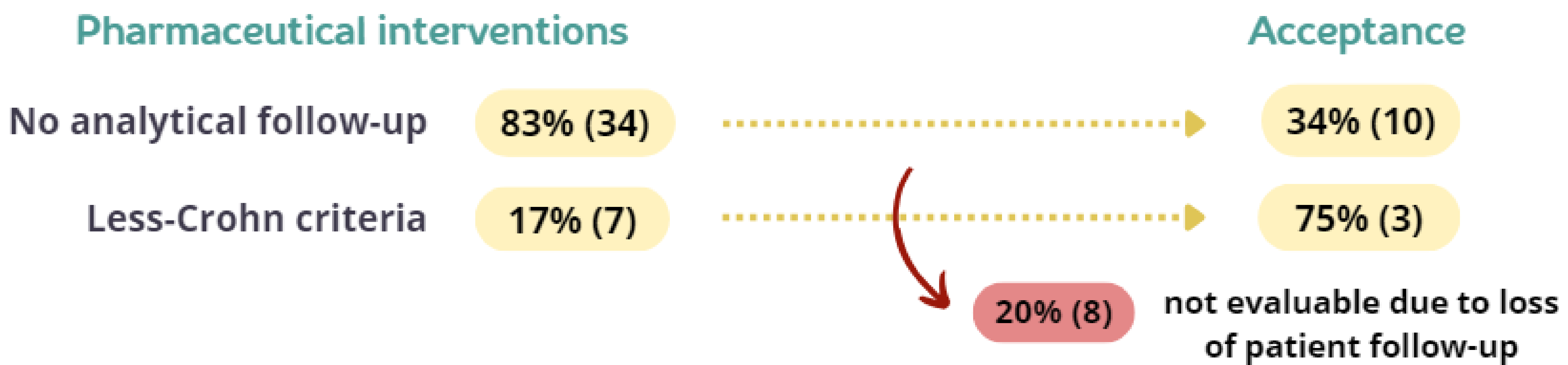
## Material and methods *Observational and prospective study in a tertiary hospital*



## Results

284 PCC reconciliated → 94 (33%) (57% women, 80±11 years) included with vitamin D prescription

The 36% (34) lacked prior vitamin D measurement. Of those measured, 13% (12) had >20 ng/ml, 19% (18) had 10-20 ng/ml, and 32% (30) had <10 ng/ml.



## Conclusion and relevance

This study reveals a lack of assessment of vitamin D levels prior to the initiation of supplementation, as well as a lack of follow-up during treatment. The implementation of pharmaceutical interventions for patients with vitamin D prescriptions demonstrated a significant opportunity to optimize pharmacotherapy in complex chronic patients.

The ongoing evaluation of patient follow-up is essential to enhance the effectiveness of these interventions, ensure appropriate management of chronic conditions, and avoid overprescription in unnecessary situations.