

M-1462 Implementation and evaluation of the Dutch multidisciplinary guideline (MDR) P

Jacintha van Balen¹, Zamire Damen-van Beek¹, Marjorie Nelissen-Vrancken², Monique Verduijn¹, Menno van Woerkom²

¹ Dutch College of General Practitioners (NHG), P.O. Box 3231 3502 GE Utrecht , The Netherlands

² Dutch Institute for Rational Use of Medicine (IVM), Utrecht, the Netherlands

Presenter: Menno van Woerkom

Background: The MDR Polypharmacy in the Elderly (2012) gives recommendations for performing a medication review from the points of view from physician, pharmacist and patient. It contains five steps: patient history, analysis, prescribers consultation, informing the patient and follow-up / monitoring.

Purpose: To investigate the feasibility of and problems with the implementation of the MDR Polypharmacy in the Elderly in daily practice.

Methods: General practitioners (GPs) and pharmacists of 3 pharmacotherapy counseling groups performed the method recommended in the MDR in 60 patients. The groups had a starting meeting and an evaluation meeting, which were supported by dedicated working materials and an advisor. Every review was performed by a couple of a GP and a pharmacist, depending on the patient. Process and effect of the reviews were evaluated. Furthermore, key members of professional bodies and national registrations were interviewed to investigate possibilities and limitations of registration IT systems.

Findings: Almost all patients received one or more proposals for a medication change (mean 2.3 per patient). The most common changes were proposed discontinuation or starting a drug. 58% of the possible medication changes was achieved throughout the duration of the project. Both GPs and pharmacists believe that medication reviews are helpful and benefit the patient. Major problems in the practical implementation of the medication reviews were • patient selection • the process of the medication analysis • monitoring the continuity of the process • the evaluation of the medication initiated by a medical specialist • the substantial time investment. The limited opportunities in the current registration IT systems of GPs and pharmacists complicate the selection of patients, the monitoring of the continuity of the process and the capturing and sharing of information and agreements between GPs and pharmacists .

Conclusion: Recommendations were made to all chain parties. Good and practical reporting in the IT systems of GPs and pharmacists and exchange of information are critical. It will reduce time investment of the professionals involved per patient and ensure the continuity of the process.

Location of Primary Work: Netherlands