PCNE Working Symposium 2020, Egmond aan Zee, the Netherlands

Workshop 2:
Validating PCNE DRP-classification v9.0

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The aim of the workshop

▶ To check the codings in the international validation round, to try to resolve most prominent issues and discuss a path forward

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working group

Results online validation round

▶ Agreement: Consistency in coding above 80 %, i.e. at least 80 % of respondents per question have chosen the same code

	Agreement	No agreement
P-codes	7	13
C-codes	5	15
I-codes	7	13

Issues to discuss

▶ Issue domain: Cases

▶ Issue: **in case 18 it is hard to know the cause**

▶ Case 18: Mrs. R has a history of angina and had a coronary artery bypass graft two weeks ago. She was discharged from the hospital last week and brings her prescription to you. Her GP has prescribed:

- Diltiazem 60 mg, 3 x 1
- Atenolol 50 mg, 1x1
- Isosorbide Mononitrate 40 mg, 3x1
- Simvastatin 20 mg, 1x1
- Acetylsalicylic acid 80 mg, 1 x 1

It looks like the isosorbide is no longer necessary. You phone the GP and agree not to dispense the isosorbide. He is going to see the patient soon and will check the blood pressure and discuss the rest of the treatment.

The Causes codes (C-codes), n=171

C-code	Frequency	Percentage
C1.3 No indication for drug	79	46 %
C1.7 Too many drugs prescribed for indication	38	22 %
C8.1 No medication reconciliation at patient transfer	23	13 %
C4.2 Duration of treatment too long	18	11 %
C1.1 Inappropriate drug according to guidelines/formulary	16	9 %
C1.5 Inappropriate duplication of therapeutic group or active ingredient	11	6 %
C8.2 No updated medication list available	11	6 %

▶ Questions: Should the case 18 be reformulated? How?

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Issues to discuss

▶ **Issue domain: Classification P-code**

▶ Issue: **P1.3 Untreated symptoms or indication vs P3.3 Unclear problem/complaint**

▶ <u>Case 5:</u> During a medication review, requested by Mrs. E (40 years old), she mentions that she feels a bit dizzy at times. This has been a problem for some months now and she thinks it is because of her medications. She is taking amitriptyline (10 mg in the evening) and nitrofurantoin 50 mg daily. She has been on these medicines for 1 years. You don't think the complaint has a relationship with her current medication. You convince her to go to the GP and discuss the problem.

The Problems codes (P-codes), n=175

P-code	Frequency (p/m)	Percentage
P3.3 Unclear problem/complaint. Further clarification necessary (please use as escape only)	70 (29/43)	40 %
P1.3 Untreated symptoms or indication	64 (8/56)	37 %
P2.1 Adverse drug event (possibly) occurring	59 (36/27)	34 %
P3.2 Unnecessary drug-treatment	8 (7/14)	5 %
P1.2 Effect of drug treatment not optimal	5 (2/4)	3 %

*see also case 8

▶ **Question: How can we differ between P1.3 and P3.3?**

Issues to discuss

▶ **Issue domain: Classification C-code**

▶ Issue: **C7.8 Patient administers/uses the drug in a wrong way vs C7.9 Patient unable to use drug/form as directed**

▶ Case 11: Ms. K, 84 years old, arrives complaining of oral thrush. She is a chronic asthmatic using inhaled corticosteroids. You check her inhaler technique and notice that she does not inhale properly at all and does not swash her mouth after inhalation. So you give her an inhaler instruction with an inhaler chamber, and tell her to swash her mouth with water after inhaling. She returns after a week and her thrush has disappeared.

The Causes codes (C-codes), n=172

C-code	Frequency	Percentage
C7.8 Patient administers/uses the drug in a wrong way	137	80 %
C7.9 Patient unable to use drug/form as directed	39	23 %
C7.10 Patient unable to understand instructions properly	15	9 %
C5.2 Necessary information not provided	14	8 %

▶ **Questions: To what extent do C7.8 and C7.9 overlap? How can we differ between them? Do we need both?**

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Conclusions:

Most discrepancies in coding due to
unclearly phrased cases =>
a need for reformulations, where we also have to decide
beforehand which codes we want to illustrate in each case

Two subdomains of C-codes to be rephrased

Six C-codes to be partly rephrased

One C-code to be removed, due to overlap with another

=> momentarily not requiring a new version