



PHARMACEUTICAL CARE NETWORK EUROPE

Working Conference 2011 – Abstract

Does pharmaceutical care impact on the safety of individual patients?

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The above mentioned participant in the PCNE WC 2009 wishes to submit following abstract for a poster or short oral communication (please type & then fax the form to the secretariat). Max. 350 words.

Title Designing a tool to identify the minimum content required in a drug information source for healthcare professionals
Author(s) Blanca Arguello, Gert Laekeman, Fernando Fernandez-Llimos.
Type of abstract <input checked="" type="checkbox"/> Research <input type="checkbox"/> Practice development <input type="checkbox"/> Practice implementation
Aim of project/study The objective is to obtain a consensuated list to identify the indispensable pieces of information in any drug information source for healthcare professionals.
Method An initial pool with 162 different drug information items that may be included in any drug information source was created by reviewing scientific literature and common sources of information for healthcare professionals. The checklist is divided into following sections: characteristics of the medicinal product, use of the medicinal product, contraindications, adverse reactions, interactions, overdose, pharmacodynamic properties, pharmacokinetic properties, safety data, evidence and prescription data. Definitions for all items were created or adapted from literature. A Delphi technique in three rounds was performed, inviting 58 experts from 23 European countries. Panel members were provided with a link to a website containing the definitions of the items. Experts from the Delphi panel evaluated every information item stating if they consider the item as required in a minimal set of information (yes/no). A minimal set of information was defined as the essential information needed for clinical practice. Items selected as minimal set of information should be included in any information source regardless its size. New items could be added by the experts along the three rounds. Consensus was established when at least 75% of participants agreed.

Result(s)

29 healthcare professionals from 18 countries completed the study. After the three rounds the checklist consisted of 186 items. 156 items reached consensus (83.87%): 126 items were defined as essential items (67.74%). (minimal set of information) and 30 items as not essential items (16.13%) (not to include as minimal set of information). High consensus rates were achieved in all the sections: characteristics of the medicinal product (75.9%), use of the medicinal product (94.4%), contraindications (100%), adverse reactions (74.1%), interactions (90.9%), overdose (100%), pharmacodynamic properties (84.6%), pharmacokinetic properties (90.2%), safety data (60.0%), evidence (40.0%), and prescription data (71.4%).

The tool created will allow drug information providers and policymakers to create information sources containing, at least, the pieces of information considered as necessary-to-practise, regardless the size or comprehensiveness of the source.

+++ NB: PhD students get 50 Pound reduction on the conference fee if their abstract is accepted ++++