



PHARMACEUTICAL CARE NETWORK EUROPE

Working Conference 2013 – Abstract

Collaborative pharmaceutical care in research and practice

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The above mentioned participant in the PCNE WC 2013 wishes to submit following abstract for a poster or oral communication. If accepted and presented, the abstract will be published in the International Journal of Clinical Pharmacy. Please make sure the abstract is no longer than 350 words, excl. author-details.

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| <p>Title Medication safety at a German University Hospital – results of a pilot project</p> |
| <p>Author(s) Lenssen R (1,5), Heidenreich A (2), Schulz JB(3), Trautwein C(4), Jaehde U (5), Eisert A (1)</p> <p>(1) Hospital Pharmacy, University Hospital Aachen, Germany (2) Department of Urology, University Hospital Aachen, Germany (3) Department of Neurology, University Hospital Aachen, Germany (4) Department of Internal Medicine III, Gastroenterology, University Hospital Aachen, Germany (5) Department of Clinical Pharmacy, Institute of Pharmacy, University of Bonn, Germany</p> |
| <p>Type of abstract</p> <p><input checked="" type="checkbox"/> Research <input type="checkbox"/> Practice development <input type="checkbox"/> Practice implementation</p> |
| <p>Aim of project/study</p> <p>The success of medication therapy is limited by drug-related problems (DRP). Furthermore, these problems influence medication safety. Pharmaceutical care service aims at reducing these DRP.</p> <p>A pilot project was conducted at the University Hospital of Aachen. The aim of this project was to reveal whether the implementation of a pharmaceutical care service on wards is feasible. In this context, we evaluated the need for pharmaceutical care for elderly and younger patients by separating the two groups at the age of 65.</p> <p>Additionally, we investigated which care setting is most vulnerable for DRP.</p> |
| <p>Method</p> <p>The patients enrolled in this project received pharmaceutical care during their stay on the cooperating wards. For each patient, a drug information service based on DRP was provided. The DRP were classified using the APS-Doc system [1].</p> <p>Each DRP was analyzed regarding to the step of the medication process at which the problem occurred.</p> |

Result(s)

The occurrence of more than two DRP per patient confirm the need for pharmaceutical care [average: 2.3 DRP/patient, min: 0, max: 11 DRP/patient]. Furthermore, the offered pharmaceutical care service was highly accepted on the wards: 77% of the recommendations were translated into practice. Significantly more drug-related problems (2.5 vs. 1.9 DRP) were observed in the group of the elderly patients compared to the younger ones ($p < 0.05$). Of all detected DRP, 37% were in the existing drug therapy on admission of the patient to the ward. Further DRP occurred at the transition of care (27%), whereas 36% took place during hospital stay.

The presented results clearly reveal the necessity for pharmaceutical care. The second part of the research project focuses on elderly patients, especially home-cared patients and nursing home residents.

Moreover, the effectiveness and benefit of pharmaceutical care service is currently being evaluated.

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References

[1] Hohmann et al., *J Clin Pharm Ther* 2012;37:276-81

+++ NB: PhD students still pay the early bird fee for their abstract if their abstract is accepted ++++