

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.

Title Amsterdam Tool for Medication Review: Development and Validation

Author(s) M.R. Mast, A. Ahmad, S.C. Hoogenboom, G. Nijpels, P.J.M. Elders, J.J. Beckeringh,						
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Type of abstract						
x Research Practice development Practice implementation						
Aim of project/study						
With the aim to detect drug related problems (DRP) and optimise treatment of elderly patients,						
primary caregivers should regularly examine the medication of these patients. In its most						
comprehensive form, a clinical medication review (CMR) should consist of a medication						
analysis, treatment analysis and patient counselling. Several sets of explicit criteria, including						
Beers' criteria, iPET, START/STOPP criteria have been developed as tools to assist caregivers in						
making appropriate choices or assessing medication of elderly patients. However, these tools are						
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often not practicable and lack the patients' perspective. The aim was to develop a structured, comprehensive and practicable assessment tool to facilitate and support the process of CMR by						

Method

pharmacists and GPs.

On the basis of their clinical experience one clinical pharmacologist and one GP developed a comprehensive list of DRP related to the most frequently supplied medicines for common chronic diseases in elderly in the Netherlands as listed by the Institute for Public Health and Environmental (RIVM) and Foundation for Pharmaceutical Statistics (SFK). Deviation from treatment recommendations for these common diseases according to the Dutch GP treatment guidelines was considered inappropriate. In order to collect DRP for the checklist, PubMed and the Cochrane library were searched. The tool was optimized by means of a content validity procedure. For this purpose, a panel of eleven experts in the field, two pharmacists, one clinical pharmacologist, two clinical geriatrics and six GPs with cardiovascular, asthma/COPD, diabetes or osteoporosis expertise was asked to comment on the tool.

Result(s)

A structured, comprehensive and practicable tool to facilitate and support the CMR process by GPs and pharmacists has been developed. The tool consists of a list of 131 DRP and a script for a patient interview including 17 questions addressing drug use from the patients' perspective,

including perceived effectiveness, side effects, problems with drug taking and adherence. The tool can be used for the detection of specific DRP, in addition to methods describing the process of CMR in a less detailed manner, including the descriptions of Lowe and co-workers, Pharmaceutical Care Network Europe, A Guide to Medication Review of the British National Prescribing Centre.

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