PCNE Working Symposium on Drug Related Problems 2009

Monday 2 November 2009, Geneva

FINAL PROGRAM

Introduction

This symposium is the first official meeting of a new PCNE working group on drug-related problems. The working groups aim to develop a particular area of interest within pharmaceutical care, where participants joining the group are experienced.
Since the original PCNE DRP-classification was introduced, there have been subsequent ameliorations, now resulting in a version 6. The older version 5.1 has been used in several studies, but was often slightly modified, depending on the requirements of the study. It is time to have a proper look at the classifications, and the underlying definitions.

Venue

Université de Genève, Faculté des sciences, Section des sciences pharmaceutiques, Quai E.-Ansermet 30, 1211 Genève. **Room 4-457 (4th floor).**

Program

Chair of the day: Dr. J.W.F. van Mil, the Netherlands

10.00 - 10.30 Welcome & registration
10.30 - 10.50 J.W.F. van Mil: Developing a DRP classification; a never ending story?
10.50 - 11.10 P. Eichenberger: Classification of drug-related problems with new prescriptions using a modified PCNE classification system
11.10 - 11.30 T. Westerlund: Community Pharmacy DRP Documentation - the Swedish Way
11.30 - 11.50 S. Leikola: Drug related problems among elderly who received comprehensive medication review
11.50 - 12.10 N. Griese: Patterns of drug related problems – results of three German Surveys
12.10 - 12.30 Discussion
12.30 - 13.30 Lunch break

13.30 - 16.00 Working groups
16.00 - 16.30 Coffee break
16.30 - 17.00 Writing up workshop results & presentations
17.00 - 18.00 Reports from workshops (20 min each, incl. questions)
18.00 Closure

The workshops

I. Defining DRPs and medication errors and their relationships. Chair: Nina Griese, Germany

The definitions of DRPs and Medication errors are different but seem alike. But the words 'Problem' and 'Error' indicate clear differences. There are medication errors that have no or not necessarily impact on outcomes, not even potentially (timing errors in administration). There are also DRPs that are not medication errors (the occurrence of ADRs). What is the overlap? Are medication errors possible causes for drug-related problems? What are valid definitions?

Desired outcome: The fundaments for a scientific article, and perhaps a PCNE definition for medication errors.

II. The PCNE classification 5.1 vs 6. Chair: Foppe van Mil, the Netherlands

Are all problems in the V5.1 indeed DRPs or causes? Did we cover all problems, or are there unmentioned DRPs. Is the proposed V6 the solution or are more adaptations necessary.

Desired outcome: Thoughts on the new PCNE classification V6, which must not necessarily be compatible with V5.1 .

III. Usability and validity of a classification. Chair: Tommy Westerlund, Sweden

Many assessors (researchers and/or pharmacists) do not find the classification easy to use. Can this be mended? Is some sort of training desirable/necessary, and under what circumstances? Can the classification be applicable for both community and hospital? Can it be used for documenting problems in retrospective medication review? What needs to be adapted for optimal usability?

Desired outcome: Guidelines and suggestions for the use of a classification with valid results