

IMPACT OF A MULTIDISCIPLINARY TEAM IN REDUCING POLYPHARMACY AND TREATMENT COMPLEXITY IN HOME CARE PATIENTS

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BACKGROUND

Frail and multimorbid patients are often prescribed multiple medications. Polypharmacy along with drug-drug interactions (DDIs) and potentially inappropriate medications (PIMs) are known as the iatrogenic triad. Consequently, this population has an increased risk of negative health outcomes.

PURPOSE

To review the medication plan of chronic patients in the home care program by a multidisciplinary team (integrated by doctors, nurses and clinical pharmacists) to adjust and optimize drug therapy and to reduce treatment complexity and polypharmacy.

MATERIAL AND METHODS

This was a **prospective interventional study in a primary care centre**. Domiciliary patients were visited by the multidisciplinary team.

The clinical pharmacist interviewed the patient and/or caregiver to obtain a comprehensive medication history (including over-the-counter drugs) and to assess medication adherence. The review process was conducted by the multidisciplinary team and consisted of four steps:



The final medication plan was agreed with patient and/or caregiver.

The Medication Regimen Complexity Index (MRCI) before and after medication review was recorded.

MRCI is a tool to quantify the complexity of prescribed medication regimens. It is based on the number of drugs, dosage frequency, administration instructions, and the prescribed dosage forms.

George et al. Development and Validation of the Medication Regimen Complexity Index. Ann Pharmacother 2004;38:1369-76.

RESULTS

Patient characteristics (N=33)



88.1 ± 6.3 years

72.7% female

Total number of treatment modifications	132
Number of modifications per patient	4.0±1.9
Type of modifications:	
- Deprescribing	43.2% (in 25 patients)
- Dose or dosage adjustment	25.0% (in 20 patients)
- Drug substitution	18.9% (in 21 patients)



CONCLUSION

Medication review by a multidisciplinary team is an effective strategy for tailoring drug therapies, reducing polypharmacy and treatment complexity in home care patients.

