

## DO PATIENTS RECEIVE MEDICATIONS ADJUSTED TO THEIR INDIVIDUAL REQUIREMENTS?

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### Background

To ensure the effectiveness and / or avoid the toxicity of drugs with narrow therapeutic and / or renal elimination margin, it is essential to adjust the dose according to the glomerular filtration rate (GFR). To collaborate in such patient care activities, a growing number of acute care hospitals have pharmacists participating in ambulatory care clinics and hospital-based home health care services.

### Purpose

To assess the adequacy of medicines prescribed in our health district in patients with decreased GFR.

### Material and Methods

Retrospective observational study.

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Study Population

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Inclusion/exclusion Criteria

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GFR

4

Dosage adjustment

patients with a serum creatinine (SC) determination in our health district during February 2016.

Inclusion: >18 years with GFR >45 ml/min/1.73m<sup>2</sup>.

Exclusion: patients whose characteristics make them unsuitable to use the CKD-EPI formula to calculate GFR.

GFR was calculated from the SC provided by the laboratory.

Through electronic medical records, prescribed doses of the medications which needed dosage adjustment were recorded.

Correct doses according to GFR of these medications at that time were also recorded.

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Prescriptions modified by GP

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Variables studied

Data from prescription changes made by the primary care physicians (GP) were collected.

- age,  
- sex,  
- GFR,

- ATC groups requiring dose adjustment,  
- Adequacy of the prescriptions was calculated as: (prescriptions adjusted correctly according to GFR) / (total number of prescriptions susceptible of modification).

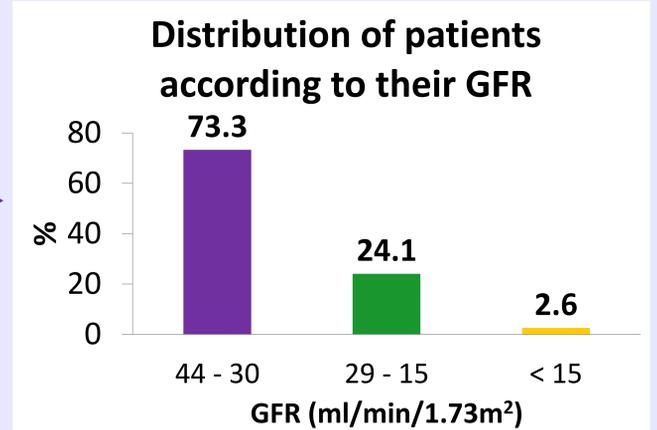
### Results



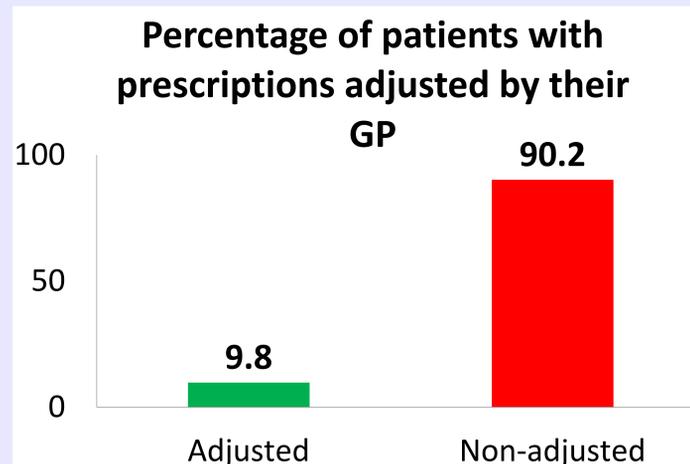
5040  
Petitions

116  
Patients  
selected

76.7% female  
mean age of 80.8 years



52.6% of patients had prescriptions suitable for adjustment (93 prescriptions in total)



**ATC groups that needed adjustment more frequently according to GFR**

A10A	25.8%
A10B	23.65%
B01A	10.75%

### Conclusions

The adequacy of medicines prescribed in our health district in patients with decreased GFR was very low. More than half of patients with a GFR <45 ml/min/1.73m<sup>2</sup> needed adjustment in at least one of their medications, since very few prescriptions were adjusted by their corresponding GP.