SITUATIONAL ANALYSIS OF POST-OPERATIVE IRON SUPPLEMENTATION PRESCRIPTIONS IN A PLASTIC SURGERY DEPARTMENT

S. CESBRON¹, P. GENDRE¹, P. NIZET¹, C. LETORT², J.F. HUON¹, N. SERANDOUR¹, J. MOQUARD¹, E. CORBINEAU¹, A.S. FANUEL REMOUÉ¹.

¹ University Hospital, Pharmacy, Nantes, France
² University Hospital, Plastic Surgery Department, Nantes, France

Background and importance

- Plastic surgery department computerization
- Treatment protocols modifications
- Iron supplementation prescriptions increase

Aim and objective

To perform an inventory of iron prescriptions and administrations → To assess relevance

Material and methods

Retrospective analysis
From 29/01/2019 to 29/08/2019
Assessment of compliance of iron supplementation prescriptions with:
- Per-operative prescriptions
- Associated iron biology
- Local iron supplementation protocols

Results

- 2,8 days: Average length of stay
- 69 iron supplementation prescriptions
- 32 prescriptions (46%) were followed by an administration
- 27 prescriptions (39%) without associated iron biology

Distribution of prescribed iron forms

- Iron-saccharose hydroxyde: 22 doses
- Ferric carboxymaltose: 7 doses
- Ferrous sulfate: 2 doses
- Ferrous fumarate: 1 dose

Iron biology associated to administration

Conclusion

In agreement with the protocol, ISH is mainly prescribed. Nevertheless, the ALS of the patients is incompatible with the administration recommendation. We note that in each case where a IB is complete, an IS is justified in postoperative care. This work will be followed by a consultation with the anesthetists to present them some reflexion tracks. A reflexion on the dose and galenic of IS in relation to the iron deficiency calculation for each patient would be interesting in the context of a possible recovery program improved after surgery.

https://www.eahp.eu/25-09PS-015