

Comprehensive assessment of pharmacotherapy in the complex chronic patient: collaboration between different levels of care

Muñoz-García M.¹, Acosta-Cano C.¹, Delgado-Silveira E.¹, Gomez-Bayona E.¹, Molina-Mendoza L.¹, Quesada-Muñoz L.¹, Zamorano-Serrano M.², López E.C.³, Greciano Greciano V.³, Álvarez-Díaz A.¹

¹Pharmacy Department. Hospital Universitario Ramón y Cajal. Instituto Ramón y Cajal de Investigación Sanitaria (IRYCIS). ²Emergency Department. Hospital Universitario Ramón y Cajal. Instituto Ramón y Cajal de Investigación Sanitaria (IRYCIS). ³Primary Care East Assitencial Direction. Madrid Community.

Background and Importance

Complex chronic patients (CCP) have changing needs that require continuous reassessment and require effective coordination of different levels of care.

Aim and Objectives

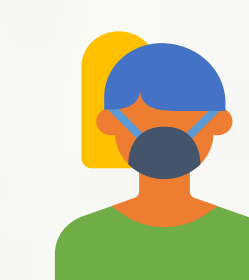
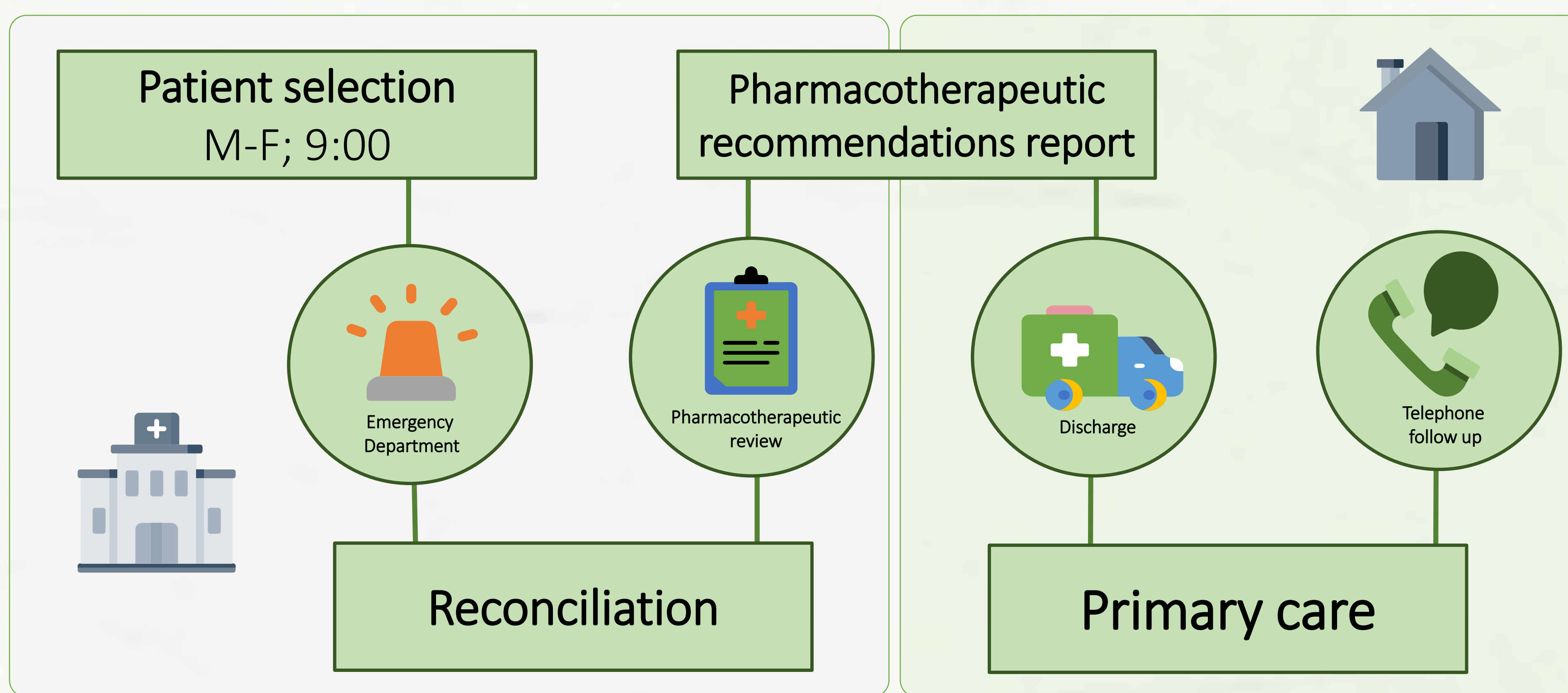
To analyse a comprehensive pharmacotherapy assessment program (CPAP) in the CCP in terms of health resources utilization, optimization of pharmacotherapy, pharmacotherapeutic recommendations accepted by prescriptors and patient satisfaction.

Materials and Methods



Emergency department (ED)

09/01/2023 - 31/08/2023.



Inclusion criteria:

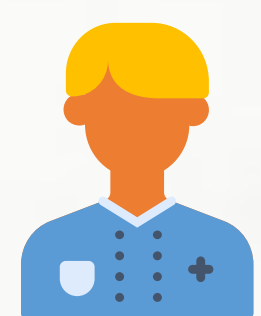
- CCP who consulted the ED.
- Signed informed consent.
- Not clinical serious or institutionalized.

CPAP

- <24H/48H.
- Conciliation.
- Adherence.
- Review of prescriptions.
- Pharmacotherapeutic review (PTR).
- Pharmacotherapeutic recommendations report.
- Telephone follow up.



Results



CCPs: 110

Gender: 56 males (50.9%)

Median age: 86(35-101)

Charlson Index: 7(2-14)



Chronic drugs: 11 (3-21)

Polymedicated patients:

103(94%)

Hyperpolymedicated patients:

74(67.3%)



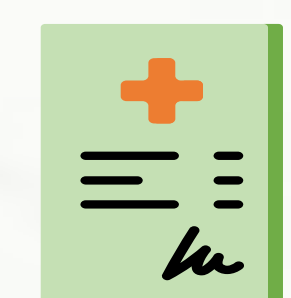
Hospitalised 85(77.3%)

Mean stay 8 days

Medical service

Internal Medicine

37(43.5%).



In SU

Recommendations made
376(mean 3.4/patient)

Recommendations accepted
91(24.2%)

At discharge

Recommendations made
168(mean 2.2/patient)

Recommendations accepted
54(32.1%)



Patients who completed follow up: 76(83.6%)

Patients who returned to ED: 17(15.8%)

Patients readmitted: 6(7.9%)

Losses: Exitus:18; Palliative:8; Other:8 .



Electronic prescription errors detected: 95;

55(57.9%) in the first evaluation.



Patient satisfaction

9.4(7-10)

Conclusion and Relevance

- A high percentage of CCPs attending the ED were admitted. A quarter of the CCPs were readmitted or returned to the ED during the month of follow-up.
- There is a decrease in the number of recommendations issued after the CCP's stay in the hospital, but there is greater acceptance of the discharge recommendations.
- In more than half of the patients there are discrepancies between the treatment described in the discharge report and their electronic prescription, which is a safety problem.
- Patients reported a high satisfaction level with the project.

