OPTIMISATION OF PHARMACOTHERAPY IN INSTITUTIONALISED PATIENTS IN A SOCIAL-HEALTH CENTRE

V. VÁZQUEZ VELA, L. JIMENEZ PICHARDO, N. MARTIN FERNANDEZ, J. PIEDRABUENA MOLINA, B. CAHERO ALBA, L. ARCAS DE LOS REYES, T. GOMEZ-DE-TRAVECEDO Y CALVO. CENTRO RESIDENCIAL DE PERSONAS MAYORES DE JEREZ DE LA FRONTERA, MEDICAL SERVICES, JEREZ DE LA FRONTERA, SPAIN.

BACKGROUND
Pharmaceutical care model proposed in Socio-Health Centers (SHC) aims to provide efficient and coordinated pharmaceutical services between different levels of care. The integration of the hospital pharmacist into the multidisciplinary team improves the socio-health care attention in institutionalized elderly patients.

MATERIALS AND METHODS
Prospective and quasi-experimental pilot study without control group, which includes the residents of a SHC. Exclusion criteria: Patients assigned to Health Centers (HC) and patients without drug treatment. Residents’ pharmacotherapy were reviewed with proposals pharmaceutical of treatment modification (PI), evaluation and multidisciplinary consensus.

PI types:
- Adecuacy to the Pharmacotherapy Guide of SHC (PGSHC) in a Health Management Area with replacement for Specialties with Better Geriatric Profile (SBGP) and the implementation of Therapeutic Equivalents Program
- Dose adjustment according to recommendations in geriatric patients (chronic kidney disease, psychoactive drugs)
- Deprescribing (duplicates, Non-Elevated Intrinsic Value Drugs (NEIVD), Stopp criteria (safety issues or poor prognosis).
- Suggestions for improvement

RESULTS
- Substitution of drugs prescribed by equivalent alternatives of the PGSHC supposes a significant cost saving.
- Improvement proposals: continuous revaluation of patients, so it is proposed the design and implementation of a Pharmacotherapy Review Program in institutionalized elderly patients with a personalized action plan integrated into the Comprehensive Geriatric Assessment and quantification of the economic impact.

CONCLUSIONS
Institutionalized patients are chronic patients with high complexity, so it is essential to review pharmacotherapeutic through an attention and care multidisciplinary shared.

The incorporation of pharmacist to multidisciplinary team allows optimization of the treatments with a rational use of these.