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:

- Deprescribing strategies
- Simplification of dosing regimen
- Identification of drug-related problems
- Replacement of PIMs

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.

RESULTS

<table>
<thead>
<tr>
<th>Patient characteristics (N=33)</th>
<th>Total number of treatment modifications</th>
<th>Number of modifications per patient</th>
<th>Type of modifications:</th>
</tr>
</thead>
<tbody>
<tr>
<td>88.1 ± 6.3 years</td>
<td>132</td>
<td>4.0±1.9</td>
<td>43.2% (in 25 patients)</td>
</tr>
<tr>
<td>72.7% female</td>
<td></td>
<td></td>
<td>25.0% (in 20 patients)</td>
</tr>
<tr>
<td>Median treatments per patient</td>
<td>11.0 ± 3.8</td>
<td></td>
<td>18.9% (in 21 patients)</td>
</tr>
<tr>
<td>MRCI before review</td>
<td>27.5 ± 11.2</td>
<td></td>
<td>23.6 ± 10.7</td>
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</tbody>
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CONCLUSION
Medication review by a multidisciplinary team is an effective strategy for tailoring drug therapies, reducing polypharmacy and treatment complexity in home care patients.

CONTACTS

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CONFLICTS OF INTEREST: None declared