

DEPRESCRIBING INTERVENTIONS PERFORMED BY HOSPITAL PHARMACISTS REDUCE POTENTIALLY INAPPROPRIATE MEDICATION AT HOSPITAL DISCHARGE

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AIM AND OBJECTIVES

To analyze the pharmacist deprescribing interventions in complex chronic patients (CCPs) performed in hospital and primary care.

BACKGROUND

In CCPs the efficacy and safety of many drugs are unknown or questionable, in fact, medication may be the cause for side effects. Deprescribing is aimed to reduce the use of potentially inappropriate medications (PIMs) and improve patient outcomes. Pharmacist deprescribing interventions may contribute to reassess prescriptions and withdraw those with a negative risk/benefit balance

RESULTS

Patients (N)	55
Female	55 %
Age (mean)	83
Medication/patient	13
Patients \geq 1 PIM	55 %
PIM/patient	1
DEPRESCRIBING INTERVENTIONS	44 %
Blood pressure treatment	30.6 %
Benzodiazepines	24.4 %
Statins	12 %
Acceptance	65 %
Other problems related to medication interventions	56 %

MATERIALS AND METHODS

Prospective study carried out in a tertiary hospital between February and March 2021. CCPs whom medication was reconciliated at hospital discharge were included and the pharmacist interventions (PIs) performed were analyzed. After hospital discharge, the acceptance of the PIs was verified and were notified to the primary care physician in case of not being accepted in hospital setting. Drugs involved in PIs were classified according to the therapeutic group established by the Anatomical Therapeutic Chemical classification and high-risk medication was quantified using the Institute for Safe Medication Practices classification for chronic patients. Deprescribing interventions were classified according to the Less-Chron criteria and other medication-related problems were also quantified.

PHARMACIST INTERVENTIONS (N)	111
High risk medication	41 %
Cardiovascular system medication	34.2 %
Nervous system medication	29.7 %
Alimentary tract and metabolism medication	13.5 %

CONCLUSIONS AND RELEVANCE

Deprescribing interventions supported by hospital pharmacists reduce potentially inappropriate medications, however, deprescribing practice is still limited in hospital and primary care.