

Analysis of potentially inappropriate medications in elderly oncologic patients by the Check-the-Meds app

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Background and importance:

Elderly patients are fragile and, often, polymedicated. These characteristics, added to an oncologic process, could generate an increased risk of drug adverse effects.

Aim and objectives:

The aim of this study was to identify potentially inappropriate medications (PIM) in oncological elderly patients with oral chemotherapy dispensed at Hospital Pharmacy.

Material and methods:

This is a 6 weeks observational and cross-sectional study

The inclusion criteria were: age above 60 years and polypharmacy with more than 6 drugs with active antineoplastic oral drugs.

Unified Medication Order (UMO) was used to identify the patient's chronic medication.

UMO joins specialized and primary prescriptions into a single visual screen for both attention levels.

Check the Meds®(v 3.6.0) is a software that facilitates optimization of drug therapy.

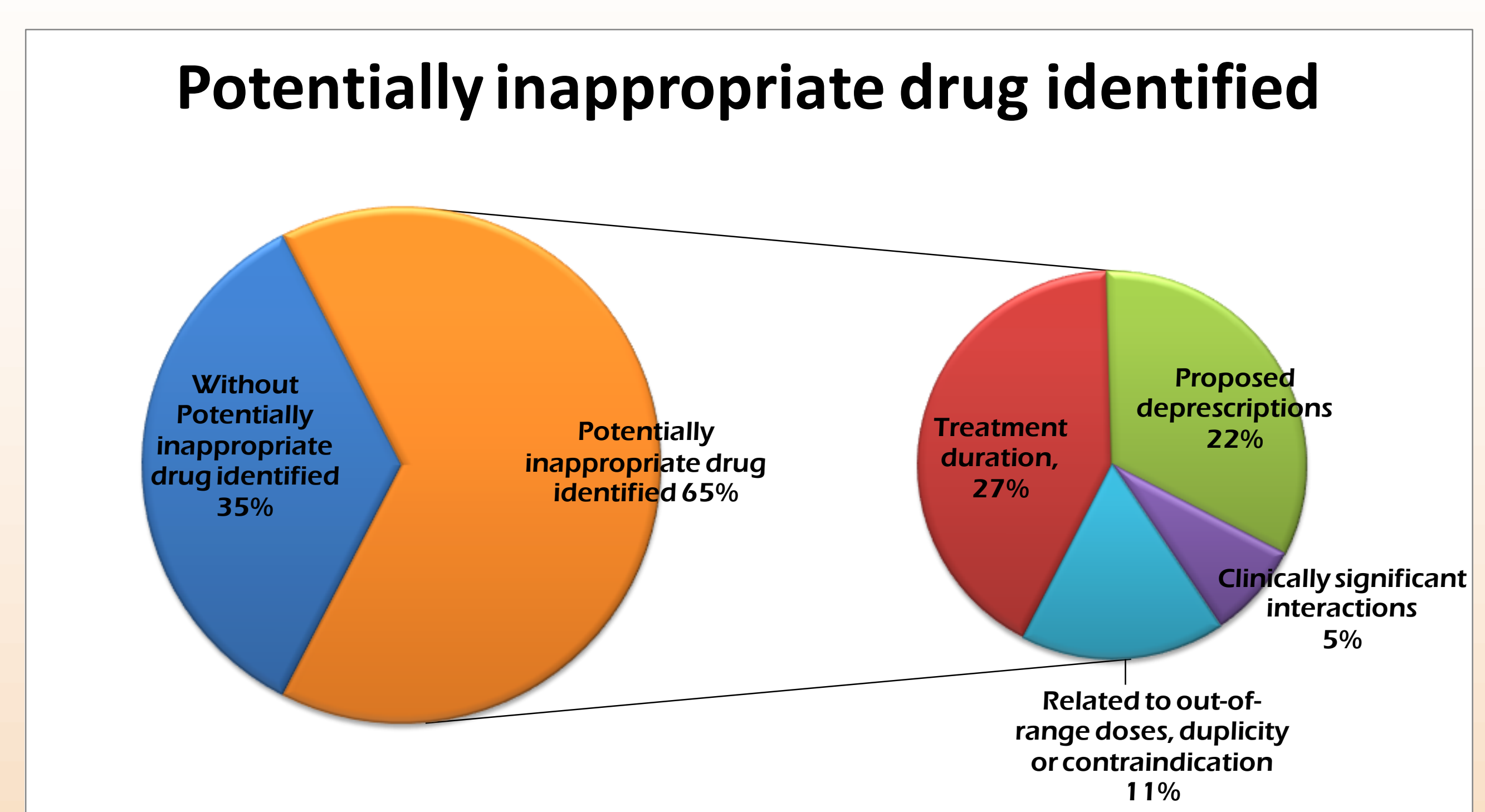
Combination of both tools, UMO and Check-the-meds® were used to review completed prescription order.

Keywords:

oncological elderly patient, oral antineoplastic, Unified Medication Order

Results:

Male	65,30%
Female	34,70%
Mean age	72,69 years (60-90)
Most tumour location	
colorectal	53,70%
prostate	19,23%
breast and lung cancer	11,50%
Prevalence of polypharmacy	
	67% in over 60 years
Mean of medicines	10,15 (6-16)



- . In 12 patients (46%), 14 clinically relevant interactions were identified.
- . In 8 patients (57%), antineoplastic treatment was involved. In 88% of cases this medicine was metamizol.
- . In the other relevant interactions, anti-inflammatory drugs participated in 66% of them.

Conclusion and relevance:

Technological tools improve safety pharmacotherapy in elderly oncological elderly patients.

It is necessary to reconsider metamizol usefulness based on its unfavourable profile of safety, even more when is not an available drug in Europe, a part from Spain.

References:

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