

# MEDICATION ADMINISTRATION IN PATIENTS WITH DYSPHAGIA: SEARCHING FOR THE BEST PHARMACEUTICAL FORM

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## BACKGROUND AND IMPORTANCE

Dysphagia is usually associated to age and different conditions (neurodegenerative diseases such as Parkinson and amyotrophic lateral sclerosis (ALS), muscular dystrophy or respiratory diseases). Medication handling is very common and may affect to bioavailability, efficacy and toxicity profile of drugs, leading to administration errors.

## AIM AND OBJECTIVES

To evaluate medication administration in patients with dysphagia by matching them to the best pharmaceutical form with recommendations on correct manipulation, after the request of reconciliation by the physician and the development of a pharmaceutical report. We also evaluated the recommendations acceptance.

## MATERIALS AND METHODS

- **Observational, retrospective study** performed from January 2019 to August 2022.
- **Collected data:** disease, number of drugs, suggested alternative suitable for dysphagia, drugs that cannot be handled due to their pharmaceutical form or hazardous drugs, and most common active ingredients.
- Patients' clinical data were collected from our EHR.

## RESULTS

- **72 patients**
- 51% ♀
- Median age: 73 (IQR 66-84)



- 46% inpatients and 54% outpatients
- Most prevalent diseases: ALS (40%) and stroke (24%)

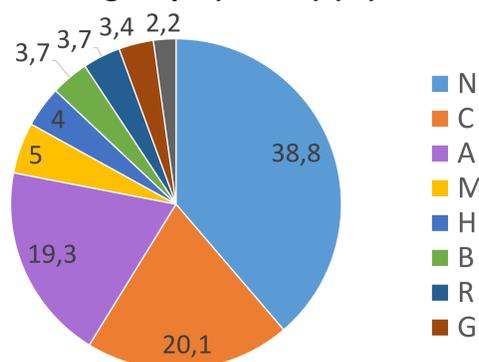
### EVALUATION



### RECOMMENDATION

- We analyzed the drugs of 52/72 patients (no access to EHR of the others).
- Median of 8 (6-10) drugs were evaluated per patient; 379 drugs in total.
- The most prescribed active ingredients were paracetamol, omeprazole, riluzole and sertraline.

ATC groups (n=379) (%)



- Median of 3 (1-4) alternatives to a more appropriate dosage form were proposed.
- The suggested alternatives were mainly oral solutions (57%) and orodispersible dosage forms (36%).
- Fifty drugs should not be manipulated.

Medical acceptance of recommendations was 100%

## CONCLUSIONS AND RELEVANCE

Dysphagia is a prevalent condition not only in elderly patients. Medication reconciliation in patients with swallowing disorders is essential to ensure treatment efficacy.

Elaboration of pharmaceutical reports with treatment alternatives is very useful in hospital setting and during transitions of care. Acceptance has been very positive by both physicians and patients.

