ERRRS IN ACENOCOUMAROL RECONCILIATION IN PATIENTS ADMITTED FROM THE EMERGENCY DEPARTMENT

MARTÍNEZ-OREA G1,2, GARCÍA-GONZÁLEZ C3, FUENTES-HIDALGO F1, DEL-MORAL-SANCHEZ JM1, ARROYO-DOMINGO E1, RODRÍGUEZ-LUCENA FJ.

1Hospital Pharmacy – Hospital Vega Baja de Orihuela, 03314 Alicante, Spain
2Email: martinez_gabriel@gva.es

Background and Importance

Acenocoumarol is an anticoagulant derived from coumarin, which acts as a vitamin K antagonist. Given its great inter- and intraindividual variability, very disparate dosing is required, and the narrow therapeutic margin makes it a drug that is very susceptible to adverse drug events.

Aim and Objectives

To detect errors in the reconciliation of treatment with acenocoumarol in patients attending the emergency department

Materials and Methods

Descriptive observational retrospective study

Primary endpoint

- Variables

- Differences between the prescribed weekly dose and the weekly home dose

- Sex

- Age

- Medical observations on prescription

- Pharmacy treatment reconciliation report

- Regimen adjusted during hospitalization

Results

31 patients included

- 61% were man

- Median age: 80±12 (RIQ: 72-85)

18 patients with prescription errors (58%)

- Regimen adjusted during hospitalization

- Pharmacy treatment reconciliation report

- Medical observations on prescription

- Higher prescribed dose

- Not hospitalized: 38%
  - Adjusted: 6%
  - Not adjusted: 32%

- Hospitalized: 62%
  - Adjusted: 94%
  - Not adjusted: 6%

One of the patients with an overdose developed upper gastrointestinal bleeding that required further care.

Conclusion

We observed a high percentage of prescription errors with acenocoumarol during hospital admission. This shows the need for greater attention on the part of health care personnel when reconciling treatment with acenocoumarol in order to prevent the occurrence of adverse effects.