Background:
Dysphagia is a prevalent difficulty among aging adults predominately because of conditions such as stroke or dementia. In patients over 65 years old, the prevalence of dysphagia ranges from 7% to 13%.
To ensure safety during oral medication administration, patients require an appropriate oral dosage form.

Purpose:
The aim of this study was to avoid errors of oral medication manipulation and administration in dysphagic patients

Material and methods:
A prospective longitudinal study was performed for two months in the internal medicine unit

Using a computerized physician order entry program, pharmacists detected inpatients with dysphagia:
- reviewed prescription to identify inadequate dosage forms
- checked the manipulation of solid oral dosage forms

Results:
Pharmacotherapy of 54 inpatients was analyzed. Each patient received, on the average, 12 different medications
Median age was 82 (55-99) years and 29 (54%) were women
A total of 20 (12 during the first month) administration errors were detected

ORAL MEDICATION PRESCRIBED

77% were not in an appropriate dosage form

PHARMACEUTICAL INTERVENTIONS

Pharmacist made 64 interventions to ensure a safe administration and 52 (81%) were accepted by nurses
Pharmacists made 25 interventions to recommend alternative solid dose formulations, switch to liquid or dispersible oral formulations, alternative routes or change medication, 20 of these (80%) were accepted by physicians

Conclusion:
Most oral medications (77%) prescribed to dysphagic patients were manipulated. This fact can promote administration errors. We have observed an improvement in the intervention’s acceptance.
Administration errors were reduced in 20%, therefore, pharmacists play an important role on medicines optimisation in patients with dysphagia.

Acknowledgements:
Pharmacy, rehabilitation and internal medicine unit staff

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Intervention's acceptance

0% 20% 40% 60% 80% 100%
Nurses Physicians

Intervention’s acceptance 1st month
Intervention’s acceptance 2nd month

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