ADVERSE EVENTS ASSOCIATED WITH HIGH-ALERT MEDICATIONS DETECTED BY TRIGGER METHODOLOGY IN PATIENTS WITH CHRONIC ILLNESSES

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BACKGROUND
The WHO recommends implementing measures to reduce adverse drugs events (ADEs) in patients with polypharmacy who are receiving treatment with high alert drugs. In Spain, we have access to a list of high-alert medications for patients with chronic diseases (HAMC list). Recently, a panel of experts had selected a set of triggers specifically for detecting ADEs in elderly patients with multi-morbidity TRIGGER-CHRON.

PURPOSE
To evaluate the effectiveness of the TRIGGER-CHRON (TC) for identifying ADEs that are caused by drugs included in the HAMC list, in chronic, multi-morbidity elderly patients (CMEP).

MATERIALS AND METHODS
Retrospective, observational, multicenter study (12 Spanish hospital)

Chronic patients with multimorbidity > 65 years. Length of stay > 48 h in Internal Medicine or Geriatric hospital units

ADEs were analyzed, and the medications involved were registered. ADEs caused by drugs included in the HAMC list were recorded.

RESULTS
720 patients

164 (76%) Caused by HAMC list

215 ADE

TC includes the following triggers:
• 11 care module.
• 10 antidotes/treatment.
• 11 medication concentrations.
• 18 abnormal laboratory values.
• 1 emergency department.

Drug involved | ADE
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Corticosteroids | 38
Loop diuretics | 30
Opioids | 26
Oral anticoagulants | 20
Antipsychotics | 15
Spironolactone/ eplerenone | 9
Antiplatelets | 7
Benzodiazepines | 7
Insulins | 5
ß-adrenergic blockers | 3
Oral hypoglycemic | 2
Digoxin | 1
Immunosuppressants | 1
Non-steroidal anti-inflammatories drugs | 1

CONCLUSIONS
The TC has allowed for detecting a large number of ADEs, more than 75% were caused by a drug included on the HAMC list. This would indicate the usefulness of this tool for determining ADEs at institutions and to monitor the impact of future interventions carried out.

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