Assessment of inappropriate drug prescription in elderly people through a screening tool

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Purpose
To find out to what extent drug prescribing is modified in elderly patients by using a systems-defined medicine review tool: potential drug-related problems (DRPs) and START (Screening Tool to Alert doctors to Right Treatment)/STOPP (Screening Tool of Older Person’s Prescriptions) criteria, optimising the pharmaceutical validation process to detect inappropriate and omitted prescribed drugs.

Methods
• A three-month prospective study carried out on 45 patients aged over 70, with 4 or more drug prescriptions, on medium or long hospitalisation in a nursing home with 140 beds.
• A database was created using all the patient’s demographic data along with prescribed drugs, diagnoses and outstanding data from their medical profile. Detected potential DRPs and START-STOPP criteria were set out, differentiating the clinical category for each patient.
• We determined the total potential DRPs found in these patients, the average value per patient and prescription line, the percentage of potential DRPs as defined by START-STOPP criteria, the total of START-STOPP criteria and the average adhered to of each criteria per patient and prescription line.

Results
• 45 patients included, 69% were women and 31% men, aged 84 on average. Average number of prescription medicines was 6.
• A total of 171 potential DRPs were identified, averaging 3.8 potential DRPs per patient and 0.62 per prescription line. 147 of the potential DRPs were due to the application of START-STOPP criteria (85.9%) 3.2 and 0.52 was the number of START-STOPP criteria per patient and per prescription line respectively.
• 48.2% (38 patients) met START criteria (0.26 START/prescription line) and 51.7% (37 patients) STOPP criteria (0.27 STOPP/prescription line).

Conclusions
• We found a high number of potential DRPs. START/STOPP criteria resulted in a fast application screening tool to detect and prevent a high percentage of these DRPs.

There are no clashes of interest
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