ADMISSIONS CAUSED BY IATROGENIC DISEASE IN A REFERENCE HOSPITAL

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**Objective:**

- **Principal objective:** to assess the prevalence of admissions for iatrogenic in the unit of Internal Medicine
- **Secondary objective:** to determine drugs most frequently involved and adverse reactions associated

**Methods:**

Descriptive, observational and cross-sectional study

**Inclusion criteria:**

patients diagnosed with iatrogenic admitted in the Department of Internal Medicine during 2013

**Patient data:**

- Age
- Gender

**Drug data:**

- Drug responsible for the adverse reaction
- Severity
- Type

**Results:**

- 273 patients
- 80.1 ± 6.3 years (55 % male)
- 10.62 % (29) iatrogenic drug

**Drugs implicated and adverse reactions:**

1. Digitalis (27.6%): bradycardia/heart failure
2. Oral anticoagulants (24.1%): gastrointestinal bleeding and soft tissue hematomas.
3. High ceiling diuretics (13.8%): hyponatremia and renal failure.
4. Corticoids (10.3%): severe hyperglycemia.
5. Neuroleptics (10.3%): confusional syndrome and hepatitis.
6. Nonsteroidal anti-inflammatory (3.5%): renal failure.
7. Insuline (3.5%): hypoglycemia.
8. ACEI (3.5%): renal failure.
9. Spirinonolactone (3.5 %): hyperkalemia.

**Conclusions:**

Prevalence of admission was 10.6 %. It indicate of the importance of iatrogenic at hospitals during admissions. Drugs or drug classes were more involved: digitalis (8 cases), oral anticoagulants (7), diuretics (4), corticosteroids (3) and neuroleptics (3). Adverse reactions were common to these drugs.