

10th Asia-Pacific Dermatology Conference

November 28-29, 2016 Melbourne, Australia

Adverse drug reaction (ADR): Using a Knowledge Survey to define gaps in clinician understanding of cutaneous ADR and drug allergy principles

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Statement of the problem: Severe cutaneous adverse drug reactions (SCAR) are conditions of high morbidity and mortality. Recent studies^{1,2} suggest documentation of cutaneous ADR (cADR) have been far from optimal, possibly reflecting clinicians' poor understanding of principles of SCAR and drug allergy. This places patients at risk of re-exposure to the culprit drug. There is also a lack of studies exploring the impact of educational intervention on delays to diagnosis of cADR/SCAR. The few studies which have assessed clinician knowledge have done so in the form of closed questions or Likert-type scales^{3,4}.

Aims:

- Assess clinician understanding of ADR principles and how they relate to cADR
- Promote accurate documentation and patient communication
- Develop an educational tool to address gaps in clinician knowledge

Methodology:

- Pilot: Develop a knowledge survey assessing principles of ADR in the context of cADR. Pilot survey tested on general medicine pharmacists, trainees and physicians
- Phase 1: Refined knowledge survey to be delivered to doctors and pharmacists at The Alfred Hospital. Data analysed to define gaps in clinician knowledge
- Phase 2: Findings of phase 1 used to develop educational tool to bridge knowledge gap. Post-intervention survey conducted to determine success

Findings of pilot survey: A pilot version of the survey has been administered to a group of doctors and pharmacists (n=15). The pilot group consisted of more doctors than pharmacists (86.7% vs 13.3%). The majority of participants (40%) only answered two questions out of five correctly. Furthermore, there did not appear to be a relationship between number of patients with cADR seen per year and the number of correct responses on the survey. No participants were able to answer all five questions correctly.

Conclusion and Significance: The results suggest a knowledge gap in clinicians understanding of cADR. It appears also that knowledge of drug allergy principles does not translate into practical application. Further refinement of the knowledge survey to include different levels of question difficulty will occur. The results will be used to establish a learning module.

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