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Role of pharmacist in correction of inappropriate medication in hospitalized geriatrics

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Statement of the Problem: Elderly people with frailty and urgent care needs are major users of health and social care services. The Beers Criteria for the use of Prescription Inappropriate Medication (PIM) in geriatrics are one of the most frequently consulted sources regarding the safety of prescribing medications for older adults. The present study aims to evaluate the rate of PIM and effect of the consultation provided by the clinical pharmacist for alteration of prescription errors.

Methodology & Theoretical Orientation: In all, 240 elderly patients have been evaluated during eight months in the internal and surgery wards of a Taleghani Hospital in Tehran, Iran. Mean age of evaluated geriatrics was 71.2 ± 7.9 . In case of any deviation from the Beers Criteria, the clinical pharmacist did an intervention by writing progress notes and talking with physicians for modification in geriatric medication.

Findings: High prevalence of PIM has been shown by Pethidine, Alprazolam and Metoclopramide respectively. As much as 33.3% of the elderly patients had at least one PIM. Moreover, 91.5% of consultations provided by clinical pharmacists have been accepted, resulting in modifications of inappropriate medication. The acceptance for the correction of non-psychotropic medication was better than the psychotropic kind.

Conclusion: Clinical pharmacists play an important role in the modification of the pharmacotherapy of hospitalized elderly patients through consultation with physicians.

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