

## Pharmaceutical Care for Drug-Related Problems

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### DESCRIPTION

Patients are discharged from the hospital; it is believed that Drug-Related Problems (DRP) often occurs. Community pharmacists have rarely studied interventions to detect, prevent, and resolve DRP in this population.

DRP is defined as "a problem that actually or may interfere with the expected health outcome of each patient's medications." The most common DRPs include: adverse drug reactions, drug selection problems, dosage problems, drug use problems, and interactions. Other terms are also used, such as Pharmaceutical Care Problems (PCI).

DRPs are classified according to the European Drug Care Network v6.2 classification. The cross-sectional data are from 1602 adults who were admitted to the medical ward. A rough and adjusted binary logistic regression was performed to determine the association between potential risk factors and PRM. The general prevalence of DRP in all medical professions is high (45.1%), among people characterized by advanced age, multiple medications, and multiple diseases. The problems that cause PRM are mainly divided into two areas (efficacy and adverse reactions). Drug selection and dosage are the most common causes.

Studies have shown that the costs associated with DRP far exceed the cost of the drugs. Ernst & Grizzle found that morbidity and mortality due to DRP are estimated to exceed \$ 177.4 billion per year.

Medications are associated with negative health outcomes, such as adverse reactions, interactions, compliance problems,

functional decline, cognitive problems, falls, urinary incontinence, and metabolic or nutritional problems. The risk of these problems increases as the amount of medicine increases. Among adults 65 and older, 40% use multiple drugs, defined as the use of four or more drugs. At the time of admission, the rate of multi-drug use among adults older than 75 years was 90%.

Also, during hospitalization, drug changes and new drugs for acute health problems will bring increased risk negative health outcomes. The detection and characterization of DRPs, the study of its causes and the evaluation of related interventions are of particular importance in daily clinical practice, especially in hospital wards, due to the high iatrogenic risk. The appropriate evaluation should consider the validated DRP classification system, representative samples, and sufficient research time to draw valid conclusions. Therefore, the present study aims to examine the prevalence and characteristics of PRM in routine clinical pharmacies and to identify factors that are associated with an increased risk of PRM in the hospital setting.

Drug use problems (especially insufficient medication compliance), ADR, treatment failure, and drug selection problems are the main ICPs encountered by the participants in this study, followed by insufficient awareness or knowledge of the participants. Wermeille and his colleagues reported similar results. The large number of PCIs encountered by participants demonstrates the importance of pharmacists working with other healthcare providers to identify and resolve these issues. These include educating participants about the uses and side effects of medications to dispel their doubts and misunderstandings, so as to better understand and therefore better adhere to medication.

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