

RATIONAL DRUG USE IN THE HOSPITALISED ELDERLY

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The study was carried out in a 200 bed geriatric hospital. Three groups of patients were studied:

- a. Respite care
- b. Acute medical admissions
- c. Long term geriatric patients

The study assessed prescribing habits within these groups by means of a Therapeutic Audit of patient medication charts (Kardex). The omission of medication doses in the various patient groups using three drug administration systems, Bulk Dose Dispensing (BDD), Individual Dose Dispensing (IDD), and Unit Dose dispensing (UDD) was also studied.

The therapeutic audit was carried out on a total of 172 patient Kardexes from the three patient groups. In this group, 29.6% of the patients were prescribed one to four drugs, 60.8% were taking five to nine drugs, while 9.6% were on ten to fourteen drugs. Results showed that 52.1% of the drugs were prescribed as oral solid preparations, 32.3% as oral liquid preparations and 4.1% as parenteral preparations. A study of the dosing frequencies revealed that 32.9% of the drugs were prescribed as PRN medications and a further 30% were prescribed as a combination of PRN and another dosing frequency. Review of the Kardexes showed 74 cases of two or more drugs of the same therapeutic drugs being prescribed of which 75.7 % were multiple therapy. There were 15 cases of excessive therapeutic doses¹ and 57 cases of sub-therapeutic doses prescribed¹. Therapies exceeding the recommended duration were observed in 153

cases while there were 58 cases of drugs listed on the NHS black list being prescribed.

The number of medication doses omitted was calculated as the minimum number of omissions per 100 patients per ward per 28 days and then expressed as a percentage of the total number of doses prescribed per 100 patients per ward per 28 days. The omission rate associated with BDD was assessed in two acute medical wards (0.7%, 2.6%) and two long term geriatric wards (8.1%, 3.4%). IDD was assessed in the Respite Care ward only and an omission rate of 1.5% was recorded. UDD was assessed in the three groups of wards, an omission rate of 0.4% was recorded in Respite Care, 3.4% in the Medical ward and 4% in the Long term geriatric ward.

REFERENCE

1. British National Formulary (1991). Number 21, published by British Medical Association and Royal Pharmaceutical Society of Great Britain.