

Half of heart patients make mistakes with their meds: study

July 3 2012, By Denise Mann, HealthDay Reporter



Almost 23 percent of errors were deemed serious, researchers report.

(HealthDay) -- Half of patients hospitalized for a heart attack or heart failure will make a mistake with their medications within a month of checking out of the hospital, new research shows.

These mistakes were as common among people who received counseling and guidance from a pharmacist as those who did not.

In the study, 50 percent of 851 participants had one or more medication error. Of these, about 23 percent were deemed to be serious and 1.8 percent were considered life-threatening. The findings appear in the July 3 issue of the [Annals of Internal Medicine](#).

The study took place at Vanderbilt University [Hospital](#) in Nashville,

Tenn., and Brigham and Women's Hospital in Boston. The patients tended to be highly educated, and yet they still had problems following instructions.

"This shows how vulnerable patients are in the transition from hospital to home," said Dr. Gregg Fonarow, a spokesman for the [American Heart Association](#) and a professor of [cardiovascular medicine](#) at the University of California, Los Angeles. "Many had thought that having pharmacist assistance, counseling and individual follow-up would reduce or even eliminate the likelihood of having an adverse drug event," he noted.

"Patients, caregivers and family members need to be knowledgeable about drug names, dosing and which medications should be discontinued, and which should continued, after hospitalization," Fonarow said. "This information should be given verbally and in writing to all involved parties. It needs to be recognized that even with all of these steps, there is still a potential for clinically important [medical errors](#)."

Dr. Adam Auerbach, director of inpatient cardiac services at North Shore University Hospital in Manhasset, N.Y., said that [medication errors](#) continue to be a big problem.

He noted that his hospital is in the process of starting some pilot programs to curb medication errors.

"We are looking at a 'teach-back' program where we each teach patients about their medications and then they teach it back to us," he said. "We are also rolling out a program where we go to a patient's house within 72 hours after discharge to make sure they are on the right medications."

According to Auerbach, there is definitely an economic aspect to the problem. Some people may skip doses or split pills to cut costs.

Choosing generic medications, when possible, can help eliminate the cost factor.

Individuals with strong social support systems tend to do better as they have one or more caregivers looking over their shoulder. "There is a huge population who, for various reasons, don't fully understand their instructions and who don't have a support network, and those are the people we are trying to reach," he said, adding that he often asks [patients](#) to bring all their medications with them to follow-up appointments to make sure they are being taken correctly.

Allen Vaida, executive vice president of the Institute for Safe Medication Practices, in Horsham, Pa., said that "it is amazing that the numbers were that high at two institutions that have good systems in place. One way to reduce rates of medication errors and adverse drug events is to use only one pharmacy for all your prescription and medication needs. This way, any interactions or potential problems are more likely to get flagged. There are a handful of drugs that are more likely to cause problems, including blood thinners. Focusing our efforts on some of the drugs that we know may cause issues can also be helpful."

More information: Learn how to reduce medication errors from the [U.S. Food and Drug Administration](#).

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