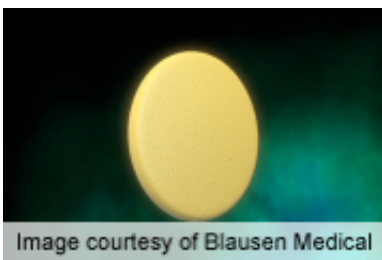


Pharmacist intervention does not prevent medication errors

July 3 2012



A pharmacist-delivered intervention does not significantly improve the rate of clinically important medication errors following discharge among hospitalized heart patients, according to a study published in the July 3 issue of the *Annals of Internal Medicine*.

(HealthDay) -- A pharmacist-delivered intervention does not significantly improve the rate of clinically important medication errors following discharge among hospitalized heart patients, according to a study published in the July 3 issue of the *Annals of Internal Medicine*.

Sunil Kripalani, M.D., from Vanderbilt University in Nashville, Tenn., and colleagues assessed the effect of a tailored pharmacist-delivered intervention on the occurrence of clinically important medication errors for 851 patients discharged following hospitalization with [acute coronary syndromes](#) or acute decompensated [heart failure](#). Participants were randomly allocated to either usual care or an intervention of pharmacist-assisted medication reconciliation, inpatient pharmacist counseling, low-

literacy adherence aids, and individualized telephone follow-up after discharge.

The researchers found that 50.8 percent of patients had one or more clinically important medication errors, of which 22.9 percent were serious and 1.8 percent were life-threatening. Overall, 30.3 percent of patients had adverse drug events (ADEs), and potential ADEs occurred in 29.7 percent. There was no significant change in the number of clinically important [medication errors](#) or ADEs per-patient for those in the intervention group (unadjusted incidence rate ratio [IRR], 0.92 [95 percent confidence interval (CI), 0.77 to 1.10] and 1.09 [95 percent CI, 0.86 to 1.39], respectively). There tended to be fewer potential ADEs in those receiving the intervention (unadjusted IRR, 0.80; CI, 0.61 to 1.04).

"A health-literacy-sensitive pharmacist intervention that included post-discharge telephone follow-up did not improve [medication safety](#) overall," the authors write. "Reducing ADEs and potential ADEs in the post-discharge period is becoming more critical as hospitals have increasing financial penalties tied to rehospitalization rates."

More information: [Full Text \(subscription or payment may be required\)](#)

Copyright © 2012 [HealthDay](#). All rights reserved.

Citation: Pharmacist intervention does not prevent medication errors (2012, July 3) retrieved 19 April 2024 from <https://medicalxpress.com/news/2012-07-pharmacist-intervention-medication-errors.html>

This document is subject to copyright. Apart from any fair dealing for the purpose of private study or research, no part may be reproduced without the written permission. The content is provided for information purposes only.