

# Innovative collaboration leads to improved discharge outcomes for children with asthma

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A new study demonstrates that pediatric patients with asthma who left the hospital with their prescription medications made fewer emergency department (ED) visits after they were discharged than if they were discharged still needing to go to a pharmacy to pick-up their medications. Led by physicians and pharmacists at Boston Medical Center (BMC) and highlighted in this month's issue of *Pediatrics*, "Meds-in-Hand" helps simplify the lives of patients and families and provides them the opportunity to learn more about how to properly use the medications from the doctors, nurses, and pharmacists who know them best.

Asthma is a common childhood disease affecting some 235 million children worldwide, according to the World Health Organization. It is also the second most costly chronic disease in children in the U.S. A significant portion of the cost - ED visits and admissions - may be avoidable if patients had better access to their prescriptions.

Led by Jonathan Hatoun, MD, MPH, formerly of BMC's department of pediatrics, and James Moses, MD, MPH, a pediatrician and associate chief quality officer at BMC, the group had determined that as many as 37 percent of BMC pediatric patients did not get their prescriptions filled in a timely manner after being discharged for an asthma exacerbation. Recognizing that this was an opportunity to improve care, a team of pediatricians and pharmacists worked together to remove barriers to picking up prescriptions. Barriers include patients and families not having transportation to the local pharmacy, finding time to

get to the pharmacy, and having active insurance.

After making improvements in the discharge process for two years, the team reliably discharged 75 percent of patients with "Meds in Hand," meaning the patients had all their medications and did not have to go to a pharmacy after being discharged. The team was able to achieve this success by implementing an in-room delivery service on the day of discharge, eliminating the need to fill prescriptions at another pharmacy. In addition, because the medication was delivered by a BMC pharmacist, patients had the opportunity to learn how to use their medications effectively while in the hospital.

Importantly, this led to a significant reduction in the odds of an ED visit in the 30 days after discharge. Patients discharged with their medications also were more likely to refill their [prescriptions](#).

"While our study was small, it shows that a fairly simple intervention can be administered by the inpatient team to help decrease future ED visits for [patients](#) with asthma" Hatoun said, adding "we might expect similar results for other diseases, though more studies need to be done."

Provided by Boston University Medical Center

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