

Nurse-led monitoring improves the care of patients prescribed mental health medicines

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New research has found that nurse-led medicines' monitoring can prevent serious adverse side effects of medicines prescribed to people with mental health problems and previously unnoticed health problems in patients can also be recognized and treated, which can help save lives and improve quality of life.

The research published in the *Nursing Standard* found that people with [mental health problems](#) benefitted from medicines' [monitoring](#) by nurses using Profiles developed in Swansea University and rolling out such monitoring to the National Health Service (NHS) could benefit patient health and wellbeing.

Professor Sue Jordan of Swansea University and Richard Jones of the Hywel Dda University Health Board reported on their study involving people supported at home by mental health crisis teams. They found that Profile-driven, nurse-led monitoring helped in the earlier identification of serious, potentially life-threatening, side effects or Adverse Drug Reactions (ADRs) to mental health medicines, including heart problems and abdominal pain (pancreatitis).

Over a period of a month the Profiles found previously unreported potentially life-threatening problems in 2 of 20 patients and unmet needs in all patients. They also found:

- three needed to be referred to consultant psychiatrists,
- three needed to be referred to general practitioners,

- One patient needed an ECG, urgently
- One patient needed to be referred to a dentist
- four participants needed medicines to be discontinued
- Previously neglected health promotion issues were highlighted in all patients

Now the researchers are calling for introduction of medicines' monitoring Profiles throughout Health Boards and Trusts.

Professor Sue Jordan who led the study and earlier research in care homes said: "The reason why we want Health Boards and Trusts to adopt medicines monitoring, and what really matters to us, is that that when our Profiles were used, fewer care home residents experienced pain and sedation, and problems with balance, confusion, restlessness, nausea and eating were addressed. Our monitoring Profiles also identify early signs of heart problems and allow nurses to work with prescribers to get the best doses of the best medicines for patients in community mental [health](#) . Rolling out this monitoring in the NHS would be an obvious benefit to patients."

Existing research has found that people suffering from severe and enduring [mental health](#) problems are at increased risk of physical illnesses such as strokes, diabetes and coronary heart disease and have a lower life expectancy than the general population. Research has also found that know that Adverse Drug Reactions, or ADRs, are responsible for 5-8% of unplanned UK hospital admissions and annually costs the NHS £1-2.5 billion.

Professor Jordan said "It is clear that the poor reporting of common ADRs results in needless human and financial cost. This study, and previous studies, show that nurse-led medicines' monitoring is an under-researched area of healthcare, but has improved patient outcomes and embedding this into routine practice would improve patient safety."

Adverse Drug Reactions (ADRs)

- Affect 7.8% patients in the community (Hakkarainen et al 2013)
- 3.7% of admissions are drug-related and, with monitoring, preventable (international systematic review of 13 studies) (Howard et al. 2007)
- Of 10 cases, 9 fatal, of substandard care, 2 relate to failure to monitor prescribed olanzapine and NSAIDs (Health Service Commissioner 2011)
- 4% of UK hospital bed capacity and 6.5% admissions are due to ADRs (1223/18820), 72% avoidable (Pirmohamed et al. 2004)10 years later the position has not changed and
- 5-8% unplanned hospital admissions are due to preventable ADRs (NICE 2015)ADR Costs
- £1-2.5bn annually to NHS [Frontier economics 2014]

Provided by Swansea University

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