

Screening tools identify potentially inappropriate meds

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(HealthDay)—Internal medicine patients are frequently prescribed

potentially inappropriate medications (PIMs), but screening tools can detect clinically relevant PIMs, according to a study published online Oct. 8 in the *Journal of Clinical Pharmacy and Therapeutics*.

Anne-Laure Blanc, Pharm.D., Ph.D., from Geneva University Hospitals in Switzerland, and colleagues compared two PIM-screening tools—STOPP/START and PIM-Check—in a general internal medicine ward. They also analyzed a random sample of 50 patients hospitalized in 2013, whose readmission within 30 days of discharge had been potentially preventable, and 50 sex-and age-matched patients who were not readmitted.

The researchers found that across the whole ward population, PIM-Check and STOPP/START detected 1,348 and 537 PIMs, respectively, which was the equivalent of 13.5 and 5.4 PIMs per patient. PIM-Check had a substantially shorter screening time versus STOPP/START (four versus 10 minutes). Of the PIMs detected using PIM-Check and STOPP/START, the clinical pharmacist found 45 percent and 42 percent, respectively, to be clinically relevant to individual patients' cases. There were no significant differences in the rates of detected and clinically relevant PIMs between readmitted and nonreadmitted [patients](#).

"The relevance of any PIM detected by these tools should always be carefully evaluated within the clinical context surrounding the individual patient," write the authors.

More information: [Abstract](#)
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