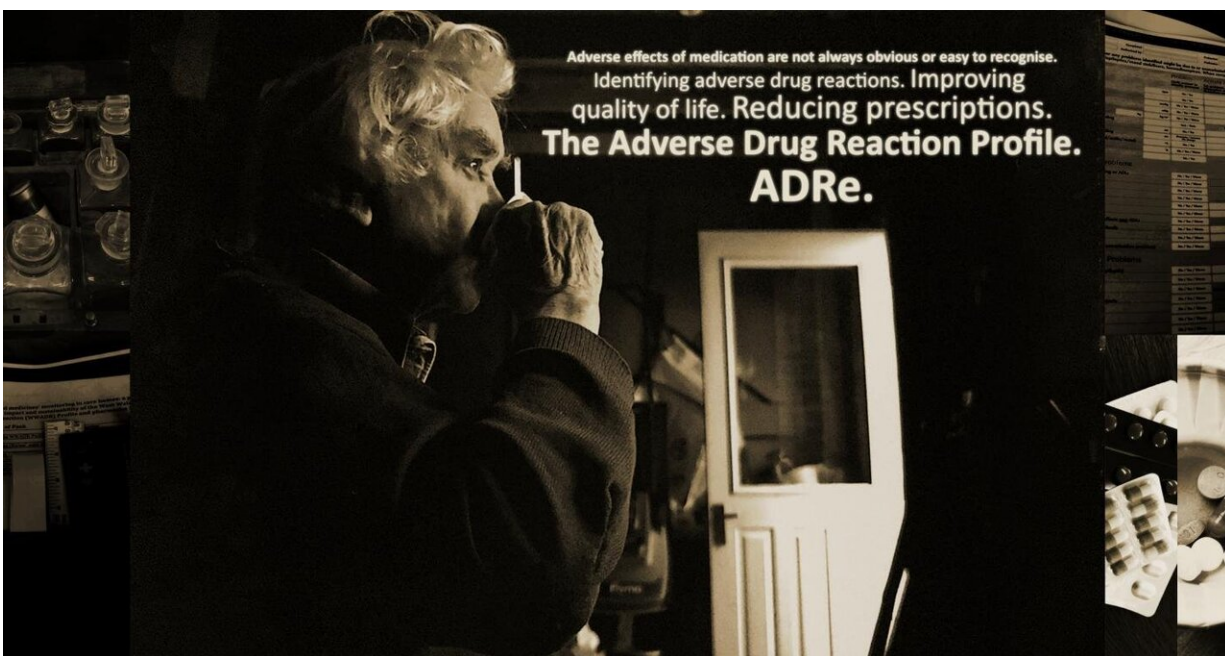


# Academics call for structured drug monitoring in care homes

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Adverse drug reaction profile Credit: Swansea University

Professor Sue Jordan from the University's College of Human and Health Sciences led the research which is newly published in the *PLOS ONE* journal. The study showed how care home residents' adverse side effects were picked up more effectively by their nurses and carers when a structured monitoring system was used alongside administration of mental health medicines.

The over-use of mental health medicines in [care homes](#) has long been a cause for concern, and insufficient patient monitoring has been seen as an important cause of medicines-related harms.

The new study examined the nurse-led medicines' monitoring system known as the Adverse Drug Reaction (ADRe) Profile which identifies and addresses the adverse effects that mental health medicines can have on patients.

This study worked with ten care homes caring for people prescribed mental health medicines to investigate:

- The clinical impact of ADRe.
- How to ensure the routine and continued use of ADRe in care homes.
- How ADRe might enhance pharmacists' medication reviews.

The study found that nurses using ADRe picked up issues which resulted in nursing care being changed for 27 of 30 residents and medication for 17 patients being reviewed.

Other key findings were that nurses using ADRe found:

- Antipsychotic medicines were reduced.
- Eight of 30 residents were identified as being in pain, and ADRe helped to resolve this e.g. by recommending review of painkillers.
- Six of 30 residents were short of breath and were referred for medication review.
- Care plans were changed for five of nine residents that had suffered falls.
- Residents were 'brighter' or less agitated or less aggressive when care changed to reduce antipsychotic medicines.

The research team also interviewed key people such as prescribers, pharmacists, nurses and care staff in the homes, residents, service users and relatives as well as [policy makers](#) and a care homes inspector. The responses were mainly favourable, because without ADRe treatable problems might be left unattended, but healthcare professionals said that time, understaffing and work demands were potential barriers to regularly using ADRe.

However patients and service users said continued monitoring was needed to avoid people becoming ill, their conditions deteriorating, mistakes being made or valuable information about a patient's condition not being picked up.

The study concluded that when ADRe is used routinely, it improves the lives of patients, helps to identify problems quickly, and results in better care and medication reviews. It also shows that as ADRe fully records a list signs and symptoms, it makes reviews by pharmacists easier and helps them make better decisions when changing, reducing or stopping medicines.

Professor Sue Jordan said: "Our study shows how simply checking patients for the signs and symptoms of possible adverse drug reactions improves the lives of the most vulnerable in society. It also shows that bringing patients' perspectives into medicines optimisation is complex, and the very complexity means that professionals may shy away from this potentially difficult task. The [positive impact](#) on patients' lives should persuade managers, service leaders and guideline developers to adopt ADRe—after all who wouldn't want to be checked for pain, breathlessness, sedation and tremor?"

Timothy Banner, study pharmacist, said: "ADRe is needed to meet the recommendations of Welsh Government for medicines optimisation Use of Antipsychotic medication in care homes, and these findings need to

be implemented by [healthcare professionals](#), policy makers and sector regulators to ensure patient safety and minimise any harm caused by adverse side effects."

Dr. Jeff Round, health economist, said: "This study shows how a simple and inexpensive tool in routine care can minimise preventable adverse side effects. There are significant resource and cost implications in failing to tackle the problem."

**More information:** Sue Jordan et al, Nurse-led medicines' monitoring in care homes, implementing the Adverse Drug Reaction (ADRe) Profile improvement initiative for mental health medicines: An observational and interview study, *PLOS ONE* (2019). [DOI: 10.1371/journal.pone.0220885](#)

Provided by Swansea University

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