OP028

Should 'Drug Related Problems' remain unnoticed among patients with chronic kidney disease of uncertain aetiology?

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Introduction

Chronic kidney disease of uncertain aetiology (CKDu) is a major public health concern in Sri Lanka. CKDu patients often consume 10-12 drugs per day, which can result in drug-related problems (DRPs). However, emerging economies such as Sri Lanka have few safeguards in place to detect and report DRPs.

Objectives

The objective of this study was to introduce clinic-based pharmacy services to detect, address and report DRPs that occurred in CKDu out-patients.

Methods

A randomized controlled clinical trial was conducted in pre-dialysis CKDu stages 4 and 5 patients at outpatient renal clinics in Teaching Hospital, Anuradhapura, Sri Lanka. DRPs were identified in both groups at baseline. The control group received usual clinic care while the intervention group received medication counseling by a clinic-based pharmacist. DRPs were identified in both groups after 12 months.

Results

At baseline, there were 123 and 126 patients in the control and intervention groups, respectively. 133 and 147 DRPs were identified from 80 and 79 patients in the control and intervention groups, respectively. The median number of DRPs per patient was 1 (1-2) (p=0.458) for both groups. After 12 months, there were 101 and 98 patients in the control and intervention groups, respectively. 137 and 59 DRPs were identified from 57 and 33 patients in the control and intervention groups, respectively. The median number of DRPs per patient was 2 (1-3) and 1 (1-2) (p=0.029) in control and intervention groups, respectively.

Conclusion

A "clinic-based pharmacist" counselling is a beneficial additional service for identifying and addressing DRPs occurring in patients with CKDu.

Key words: "Clinic-based pharmacist", medication counseling, out-patient

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