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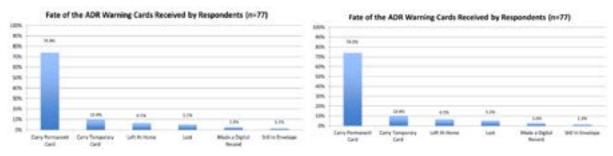
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A QA study of adverse drug reaction patient communication

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A dverse drug reactions (ADRs) are a common cause of negative health outcomes for patients, often resulting in increase in hospitalization, length of stay and the overall cost. This makes it important to have procedures that minimize risk of inadvertent re-exposure to a drug that has caused the patient an ADR. To evaluate patient receipt and use of ADR warning cards as well as their understanding of ADR information provided, we undertook a retrospective telephone survey of past inpatients who experienced an ADR; this covered the period between January 2013 and April 2016. 82% (89) recalled the ADR event; 55% (49) recalled receiving a temporary ADR warning card and; 73% (65) remember receiving a permanent ADR warning card post-discharge. The ADR warning card was carried by 74% (65) of participants. 85.4% (76) had told their regular GP and 40% (36) had told a pharmacist about their ADR. Overall satisfaction with the current ADR management services was high with 89% (79) agreeing that this adverse drug reaction service was valuable to them. Requiring patients to be responsible for communicating ADRs to all relevant health care professionals outside of this hospital network was not identified as an effective strategy. Patient satisfaction with current ADR management services was high. Many participants still have/use the ADR warning card. Most people were able to participate without reservation.



Biography

Mike McDonough is a Physician at Footscray Hospital in Melbourne. He specializes in Addiction Medicine & Toxicology. He acts as Chair of the hospital's ADR committee and has special interest in Medication Safety.

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