

EFFECTIVENESS OF THE PERSONALIZED DOSING SERVICE IN POLYMEDICATED PATIENTS

Chaxiraxi Morales Marrero¹, Pilar Modamio Charles², Sandra Dévora Gutiérrez¹ and Susana Abdala Kuri¹

1. Department of physical medicine and pharmacology, section of pharmacology, Universidad La Laguna. Tenerife. Spain

2. Department of pharmacology, Universitat Barcelona. Cataluña. Spain

INTRODUCTION

Therapeutic compliance is defined as the percentage of agreement between the behavior and a patient against instructions provided by your doctor or any health worker regarding your medication and lifestyle¹.

The personalized dosage service helps patients to follow their pharmacotherapeutic treatment, organizing their medication in doses and days. This organization is carried out by means of special blister packs, whose duration is one week².

The control of many chronic diseases requires changes in life habits, diet or pharmacological treatment, sometimes difficult to achieve if they are asymptomatic. elderly people present a large number of prescribed medications, a logical way to minimize problems related to medications would be a periodic review of treatments. The Stopp / Start criteria are tools that facilitate the identification of problems related to medicines¹.

MATERIAL AND METHODS

A consulted bibliographic review of databases was carried out. Scientific publications not found in these bases were added.

The search strategy included descriptive terms related to the study population, adherence, interventions to improve therapeutic compliance and polypharmacy. Those aimed at improving the therapeutic noncompliance were included, improving the adherence rate.

The following criteria were established:

- Provide information on the subject to be treated
- Free texts
- Published in English or Spanish

JUSTIFICATION

The present study shows the need for several strategies to improve therapeutic adherence and adds that improving it does not imply an improvement in the quality of life of the patient

RESULTS AND DISCUSSION

The therapeutic non-compliance diminishes the effectiveness of the treatment, this problem has a multifactorial character.

The therapeutic effectiveness depends on the type of treatment and the degree of compliance of the patient. Non-compliance is especially frequent in chronic diseases, in the elderly and in polymedicated patients.

Postcolonial complicity is one of the causes that contribute to this lack of adherence.

Customized dosing systems organize the patient's medication in disposable blister packs thus reducing the possible problems related to medications.

In a study in a community pharmacy in Málaga in 2013 of 84 patients enrolled in the personalized dosing system, the therapeutic histories were reviewed using the Stopp / Start criteria. Forty-six patients had at least one Stopp / Start criterion; of which 36.8% presented Stopp criteria, 32.6% criteria Start and 30.5% both criteria

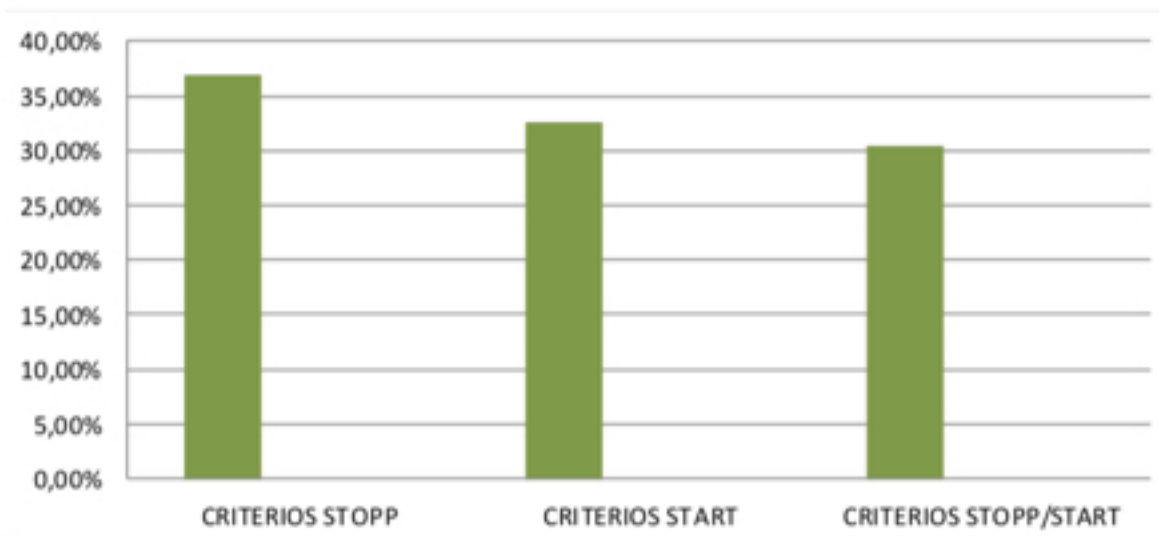


Figure 1. Percentages of patients with detected criteria

Conclusion

The geriatric population has a large number of drugs in its treatment plan and poor therapeutic compliance. Having knowledge of the factors that decrease the therapeutic adherence, allows to increase it.

The use of the personalized dosing system simplifies and improves the therapeutic adherence. Increase adherence or imply an improvement in the quality of life of the patient, as health professionals, we must be alert against any adverse reaction or problem related to medications.

We conclude that the review of treatments with the Stopp / Start criteria in patients using the custom dosage system allows the detection of inappropriate prescriptions

REFERENCES

1. González-Bueno J, Vega-Coca M^ª, Pérez A, Toscano-Guzmán M^ª, Pérez-Guerrero C, Santos- Ramos B. Intervenciones para la mejora de la adherencia al tratamiento en pacientes pluripatológicos: resumen de revisiones sistemáticas. Aten. Primaria. 2016; 48(2):121-130.
2. Garrote S, Codesal T. Criterios de implantación de los sistemas personalizados de dosificación (SPD) y seguimiento de su adherencia en oficina de farmacia en Zamora de febrero a julio de 2015. ISSN electrónico: 2445-1355.
3. Martín Calero M^ª, De La Mata Martín M^ª, Marín Isorna F, Lorenzo Murillo R, Lorenzo Murillo R, Luis Amado A, Villegas Lama I. La caracterización de pacientes como herramientas útil para ofertar servicios profesionales personalizados en farmacia comunitaria. Farmacéuticos Comunitarios. 2015; 7(4):5-17.
4. Pabón Valera Y. Factores que influyen en la adherencia en el tratamiento farmacológico de los pacientes con riesgo de enfermedades cardiovasculares. Reporte de investigación. Nº 7. Septiembre 2015.