Homebased Medication Review

Published: 24-07-2007
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The objective of this study is to examine whether the FTC-intervention improves the quality of pharmacotherapy in individual patients.

Ethical review	Approved WMO
Status	Recruitment stopped
Health condition type	Other condition
Study type	Interventional

Summary

ID

NL-OMON31674

Source
ToetsingOnline

Brief title
Homebased Medication Review

Condition

- Other condition

Synonym
nvt

Health condition

alle aandoeningen waarvoor farmacotherapie wordt ingezet.

Research involving
Human

Sponsors and support

Primary sponsor: LLOYDS Apotheken
Source(s) of monetary or material Support: Achmea,Astra Zeneca,LLOYDS apotheken,Menzis,Wetenschappelijk Instituut Nederlandse apothekers

Intervention

Keyword: drug related problems, home visit, medication review, pharmacist

Outcome measures

Primary outcome

1. The number of drug related problems per patient.

2. The number of patients achieving target levels concerning blood pressure,

cholesterol and HbA1C

Secondary outcome

1. The number of patient being treated optimally according to clinical

guidelines.

2. The number of medicines per patient

3. The number unplanned hospital admissions

4. Change in mean values for HBA1C, cholesterol level and/or blood pressure.

5. Quality of life

6. Satisfaction of GPs, pharmacists and patient with the FTC intervention

7. The capability of pharmacists to perform a comprehensive medication review

Study description

Background summary

The recently published HARM study found that 2,4% of all hospital admissions and 5,6% of all acute admissions in the Netherlands were drug related. Of these admissions 46% were considered *possibly avoidable*. Drug related problems are a considerable risk for patient safety, especially among patients using multiple chronic medicines. Regular and systematic review of individual patient*s drug treatment can help to reduce the number of drug related problems en may improve patient outcome. The Medication Home Visit (FTC) project of LLOYDS Pharmacies is based on the Australian Home Medicines Review (HMR).

During this project a pharmacy-led medication review will be performed based on the patient*s medication list, GP clinical notes and information from a patient*s home-interview. The intervention will be performed and monitored by a community pharmacist in close collaboration with the patient*s GP. The present study examines the possibility to implement the FTC intervention in primary care in the Netherlands and the effect of the FTC intervention on the quality of pharmacotherapy and clinical outcomes.

Study objective

The objective of this study is to examine whether the FTC-intervention improves the quality of pharmacotherapy in individual patients.

Study design

A randomized-controlled intervention trial. After informed consent patients are randomized to an intervention or control group, using the GP as unit of randomization.

Intervention

A medication review will be performed by the patient*s pharmacist, using the medication list and GP clinical records. The medication review is evaluated and, if necessary, completed by an independent pharmacist panel. All potential drug related problems are identified and classified. The pharmacist visits the patient at home for an interview about the patient*s medicines and to identify other possible drug related problems. The medication review will be completed using the information from the patient*s interview. Adjustments in pharmacotherapy will be proposed and discussed with the patient*s GP. A treatment plan will be formulated. The GP or pharmacist will discuss the treatment plan with the patient. Patients in the control group receive regular care.

Study burden and risks

The risk and burden for patients in this study is limited, because the intervention is embedded in regular care. However, potential drug related problems may be identified and therefore adjustments in pharmacotherapy may be proposed. This may raise patient*s concerns for not receiving optimal treatment in the period before the intervention. We will try to minimize this risk, by fully informing the patient, GP and pharmacists about the intervention and the possible consequences for treatment.

Contacts

Public
LLOYDS Apotheken

Amalialaan 126
3743 KJ Baarn
Nederland
Scientific
LLOYDS Apotheken

Amalialaan 126
3743 KJ Baarn
Nederland

Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age
Adults (18-64 years)
Elderly (65 years and older)

Inclusion criteria

Persons aged 65 or older using at least five medicines for chronic medical conditions, including at least one cardiovascular or antidiabetic drug.

Exclusion criteria

Persons receiving repeat prescriptions solely from a specialist.

Study design

Design

Study type:	Interventional
Intervention model:	Parallel
Allocation:	Randomized controlled trial
Masking:	Open (masking not used)

Primary purpose: Treatment

Recruitment

NL

Recruitment status:	Recruitment stopped
Start date (anticipated):	20-09-2007
Enrollment:	400
Type:	Actual

Ethics review

Approved WMO Date:	24-07-2007
Application type:	First submission
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)
Approved WMO Date:	24-06-2008
Application type:	Amendment
Review commission:	METC Universitair Medisch Centrum Utrecht (Utrecht)

Study registrations

Followed up by the following (possibly more current) registration

No registrations found.

Other (possibly less up-to-date) registrations in this register

No registrations found.

In other registers

Register	ID
CCMO	NL16412.041.07