

Effect of a pharmaceutical care plan by a multidisciplinary team of general practitioner and community pharmacist, together with the patient, on the prevention of hospital admissions related to medication

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To determine the effect of a pharmaceutical care plan by the general practitioner and the community pharmacist, together with the patient, on the frequency of drug related hospital admissions.

Ethical review	Approved WMO
Status	Pending
Health condition type	Other condition
Study type	Observational non invasive

Summary

ID

NL-OMON31973

Source

ToetsingOnline

Brief title

Preventing Hospital Admissions by Reviewing Medication (pHARM)

Condition

- Other condition

Synonym

not applicable

Health condition

niet van toepassing (geen specifieke aandoening)

Research involving

Human

Sponsors and support

Primary sponsor: Universiteit Utrecht

Source(s) of monetary or material Support: subsidie ZonMw

Intervention

Keyword: drug related hospitalisations, medication review, multidisciplinary team, pharmaceutical care plan

Outcome measures

Primary outcome

Frequency of drug related hospital admissions

Secondary outcome

- adverse drug events
- death
- quality of life.

Study description

Background summary

In 2006 a large multicenter study into drug related hospitalisations in The Netherlands was performed: the HARM study (Hospital Admissions Related to Medications). The HARM study determined the frequency of hospital admissions caused by an adverse drug reaction or by a medication error within 21 hospitals from all regions of The Netherlands. The study showed that this frequency was considerable, as was expected from foreign studies. Almost 6% of the unplanned admissions was drug related, of which 46% was potentially avoidable (potentially caused by a medication error). When extrapolated to the Netherlands this would result in a total of 16,000 potentially avoidable drug related hospitalisations per year.

This large number of 16,000 is the reason for performing this intervention

study, which is aimed at reducing this number.

Study objective

To determine the effect of a pharmaceutical care plan by the general practitioner and the community pharmacist, together with the patient, on the frequency of drug related hospital admissions.

Study design

Open, randomised, multicenter study in 100 pharmacies with selection of intervention and control patients within each pharmacy of different general practitioners.

Study burden and risks

Burden concerns the filling out of questionnaires (2x quality of life, 1x questionnaire on drug related problems) and a pharmaceutical intake (45 min) and at least 3 evaluation visits (total 30 min).

No risks associated with participation.

Contacts

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Trial sites

Listed location countries

Netherlands

Eligibility criteria

Age

Adults (18-64 years)

Elderly (65 years and older)

Inclusion criteria

more than 65 years of age

polypharmacy

non compliant

use of drugs from ATC classes A or B

Exclusion criteria

residents from nursing home

informed consent denied

general practitioner or pharmacist non cooperative

Study design

Design

Study type: Observational non invasive

Intervention model: Parallel

Allocation: Randomized controlled trial

Masking: Open (masking not used)

Primary purpose: Health services research

Recruitment

NL

Recruitment status: Pending

Start date (anticipated): 01-01-2008

Enrollment: 10000
Type: Anticipated

Ethics review

Approved WMO
Application type: First submission
Review commission: METC Brabant (Tilburg)

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	NL20582.028.07