

From HARM to CHARM: Pharmaceutical advisor aids cardiology outpatients with medication in Atrium Hospital; the value of the pharmaceutical counselor at the cardiology office in recapitulating and guiding medication

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- to investigate the additional value of a pharmaceutical consultant at the cardiology outpatient unit on quality, safety, efficacy, patient's satisfaction and costs compared to usual care. Usual care (a normal cardiologist's consultation)...

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

Summary

ID

NL-OMON34186

Source

ToetsingOnline

Brief title

From HARM to CHARM

Condition

- Other condition

Synonym

-

Health condition

begrip medicatie die wordt gebruikt

Research involving

Human

Sponsors and support

Primary sponsor: Atrium Medisch Centrum

Source(s) of monetary or material Support: industrie, Sanofi-aventis

Intervention

Keyword: cardiology, medication guidance, outpatients, Pharmaceutical counselor

Outcome measures

Primary outcome

Discrepancies between new or dosage-adapted prescriptions (phase 1) and what the patient really is using (phase 2).

Discrepancies are determined during phase 2 based on information given by the patient and information from CardioNL (archive cardiology) and OZIS (history of pharmacy deliveries).

Secondary outcome

- time of consult cardiologist + time for making medication overview by cardiologist
- patient's satisfaction
- number of pharmacotherapeutic advices by pharmaceutical consultant
- acute hospital admissions between consult 1 and 2

Study description

Background summary

To Err Is History

From the well-known report *To err is human*, it is known that many errors in health care involve medication [1].

In The Netherlands it was found that medication problems are related to a large amount of hospital admissions [2-3]. One of the problems with medication is lack of medication overview when patients are transferred from home setting to the hospital [4-5] and lack of medication insight by patients.

Local research: Atrium MC

In previous observational (pilot) research it was found that many medication transfer errors occurred in the outpatients clinic * in 120 patients more than 150 medication discrepancies occurred compared to medication history from pharmacies or lack of follow-up of medication changes by cardiologists [6]. It is necessary to make a good overview of the medication that patients use for the doctor to make treatment decisions and to prevent introducing transfer errors in prescriptions. Moreover, it is important that patients which medication they use and in which dosage.

Various research has been done on this topic in The Netherlands for hospital admissions [7-13]. For outpatients clinical consults there is still a lack of data.

Intervention research: CHARM

After finishing the pilot research project, we will investigate the potential role of the pharmaceutical consultant to make a medication overview with the outpatient for the doctor, and checking the knowledge of the patient's medication usage.

CHARM: pharmaceutical Consultant Helps in outpatient cardiology unit Atrium hospital in Reconciliation of Medication.

Medication reconciliation: verification, clarification, reconciliation and transmission.

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Study objective

- to investigate the additional value of a pharmaceutical consultant at the cardiology outpatient unit on quality, safety, efficacy, patient's satisfaction and costs compared to usual care.

Usual care (a normal cardiologist's consultation) means an interview of 10 minutes by the cardiologist, in which a medication overview is made based on information of the patient, and usually treatment decisions are made with new or recurrent prescriptions.

Study design

Randomised (1:1) open trial

Intervention

Medication reconciliation and guidance by pharmaceutical begeleiding door farmaceutisch consulent

Study burden and risks

Not applicable.

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

Age 65 years or older;

At least 5 drugs prescribed

Exclusion criteria

-

Study design

Design

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

Primary purpose: Health services research

Recruitment

NL	
Recruitment status:	Recruitment stopped
Start date (anticipated):	14-09-2010
Enrollment:	160
Type:	Actual

Ethics review

Approved WMO	
Date:	02-08-2010
Application type:	First submission
Review commission:	METC Z: Zuyderland-Zuyd (Heerlen)

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	NL32653.096.10