



# Pharmacists help prevent drug reactions in care home patients

Yasmeen Haq, prescribing support pharmacist, Newport Local Health Board

## MEDICATION USAGE REVIEWS IN CARE HOMES, NEWPORT, WALES

Medication errors cost the NHS £500 million a year in additional days spent in hospital. Research has shown that 10 adverse reactions to medicines happen per 100 residents in long-term care homes each month. This shows a need for regular medication reviews in the elderly, who tend to take more prescription drugs than any other age group.

A pilot study was set up in Newport in November 2005 for 12 months which involved using community pharmacists to carry out medication usage reviews (MURs) on 304 patients in 12 care homes. The average age of patients was 81 years, with each taking an average of seven medicines.

## WHY THE STUDY WAS NEEDED

Elderly patients receive more prescriptions per head than any other group in the UK, increasing from 16.7 per year in 1989 to 24.8 in 1999. By

the age of 75, people are taking an average of four or more prescribed medicines, but as many as 50 per cent of older people may not be taking their medication correctly. As well as wastage and cost implications, they have a higher risk of medication errors.

Researchers in the US have found that 42 per cent of all adverse drug reactions are preventable, including 61 per cent of serious and life-threatening reactions. The Department of Health has set a target to reduce serious medication errors by 40 per cent.

## HOW THE MUR STUDY WORKED

The MUR study in Newport ran for a year and was funded by Newport's Health, Social Care and Wellbeing strategy.

The MURs were carried out by community pharmacists within the care homes. The aims were:

- To help prevent hospital admission, e.g. prevention of osteoporosis with recommendation of calcium supplements.

- To prevent patients developing complications.
- To pick up any conditions that could easily be treated by the patients' GP or pharmacist.

A member of the care home staff was present at each MUR so they would be able to help ensure the patient took their medicines correctly in future.

The MURs gave patients an opportunity to discuss their medication and any problems. Pharmacists had been given a copy of the patient's up-to-date repeat prescription list by the GP. Any problems found were reported by the pharmacist to the GP and copies of the review given to the patient and GP.

An average of two interventions and/or recommendations was made for each patient reviewed.



## HOW SUCCESSFUL WAS THE STUDY?

“The patients in the care homes were pleased to be getting extra support from a specialist in medicines,” says Yasmeen Haq, prescribing support pharmacist at Newport Local Health Board.

“The staff in the care homes appreciated having another pair of eyes to check their residents were taking their medicines correctly.”

“We had great support from the local GPs, who often have to make extra house calls because of problems with medication, so this saved them time. It helped to prevent some unnecessary hospital admissions and meant that proper monitoring of a patient’s medication was put into place.”

## AVOIDING UNNECESSARY HOSPITAL ADMISSIONS

Through schemes such as these, pharmacists in Wales have been able to show how they can help keep older people healthy without the need for unnecessary hospital admissions. This obviously eliminates the distress that many elderly patients can feel when they need to be admitted into hospital. The successful prevention of medication-related adverse drug reactions also helps the NHS save millions of pounds in unnecessary hospital admissions, and helps reduce the number of fractures and falls suffered by elderly patients.

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