

عنوان مقاله:

Identifying the pattern and risk factors for potential medication dosing errors in chronic renal impairment of critically ill patients

محل انتشار:

فصلنامه تحقیقات جاری در داروسازی، دوره 7، شماره 4 (سال: 1400)

تعداد صفحات اصل مقاله: 10

نویسندگان:

Bafrin Sedaghat - *Department of Clinical Pharmacy and Pharmacy Practice, Faculty of Pharmacy, Isfahan University of Medical Sciences, Isfahan, Iran*

Saeed Abbasi - *Anesthesiology and Critical Care Research Center, Isfahan University of Medical Sciences, Isfahan, Iran*

Shadi Farsaei - *Department of Clinical Pharmacy and Pharmacy Practice, Faculty of Pharmacy, Isfahan University of Medical Sciences, Isfahan, Iran*

خلاصه مقاله:

Purpose: Different prescription entries usually complicate the drug therapy for critically ill patients; therefore, we conducted this prospective study to assess the rates for appropriate renal dosing modifications in chronic kidney disease (CKD) patients admitted to the ICU and reported possible related factors of misadjustments. **Design:** We enrolled adult ICU patients who received at least one drug and experienced CKD with the estimated glomerular filtration rate (eGFR) \leq of 59 ml/min on ICU admission. The latest Lexicomp drug information handbook recommendations were also applied as a standard guide for renal dosing changes. **results:** A total of 701 prescription entries were studied in 97 patients, and 13.8% (97 medications) required renal dose adjustment. Of the 97 drugs, 20.6% (20) had not been prescribed appropriately, according to eGFR. Antibiotics were the most likely medication group to require a dose adjustment and comprised the largest number of inappropriate prescriptions in our study. EGFR and the number of drugs that needed dose modification significantly affected renal dosing adjustment accuracy ($p = 0.03$ and 0.01 , respectively). **conclusion:** These results revealed a high percentage of appropriate renal dose adjustment in ICU compared to other studies that evaluated non-critically ill patients. However, more attention should be paid to patients with a higher number of prescribed medicines for renal dose modification and lower eGFR to reduce medication errors.

کلمات کلیدی:

Inappropriate prescribing, Critical illness, Renal insufficiency

لینک ثابت مقاله در پایگاه سیویلیکا:

<https://civilica.com/doc/1368460>



