Retrospective Medication Analysis in Specialized Palliative Home Care - A Descriptive Pilot Study

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Background

Polypharmacy and **potentially inappropriate medications** (PIMs) are common in palliative care (PC). PC drug regimens are prone to drug-related problems (DRPs) that might risk the quality of care in already vulnerable patients. Outpatient PC settings create **interfaces** that add to the occurrence of DRPs.

Pharmacist-led medication review and recommendations for action (e.g., deprescribing) can contribute to the **detection and reduction of DRPs** in inpatient PC. While most tools to assess PIMs are not applicable in PC settings, the **STOPP-Frail criteria** help to identify preventative medications that are recommended to be discontinued in patients with limited life-expectancy.

Objectives

To identify **opportunities for pharmacy services** in outpatient PC

(1) by providing an overview of current prescribing practice in specialized palliative home care clients and

(2) by focusing on medication safety with an emphasis on drug appropriateness and deprescribing.

Methods

Descriptive pilot study: We will retrospectively analyze medication plans of patients that received specialized palliative home care by the mobile PC team (MPCT) of the *Spitex Stadt Luzern*. Baseline patient data (e.g., age, sex, main diagnosis) will be collected for descriptive analysis.
Medication analysis will be performed at three different points in time (see *Figure*). At each point in time

- regular medication and as-needed (PRN) medication will be analyzed,
- the appropriateness of prescribed medications will be assessed using the *STOPP-Frail criteria.*

→ **Eligibility criteria:** ≥18 years, <6 months from initial assessment to death/transfer to inpatient setting, curative treatments stopped

Approval from the ethics committee of the canton of Bern for the study is pending. The analysis is expected to be finalized in summer 2022.

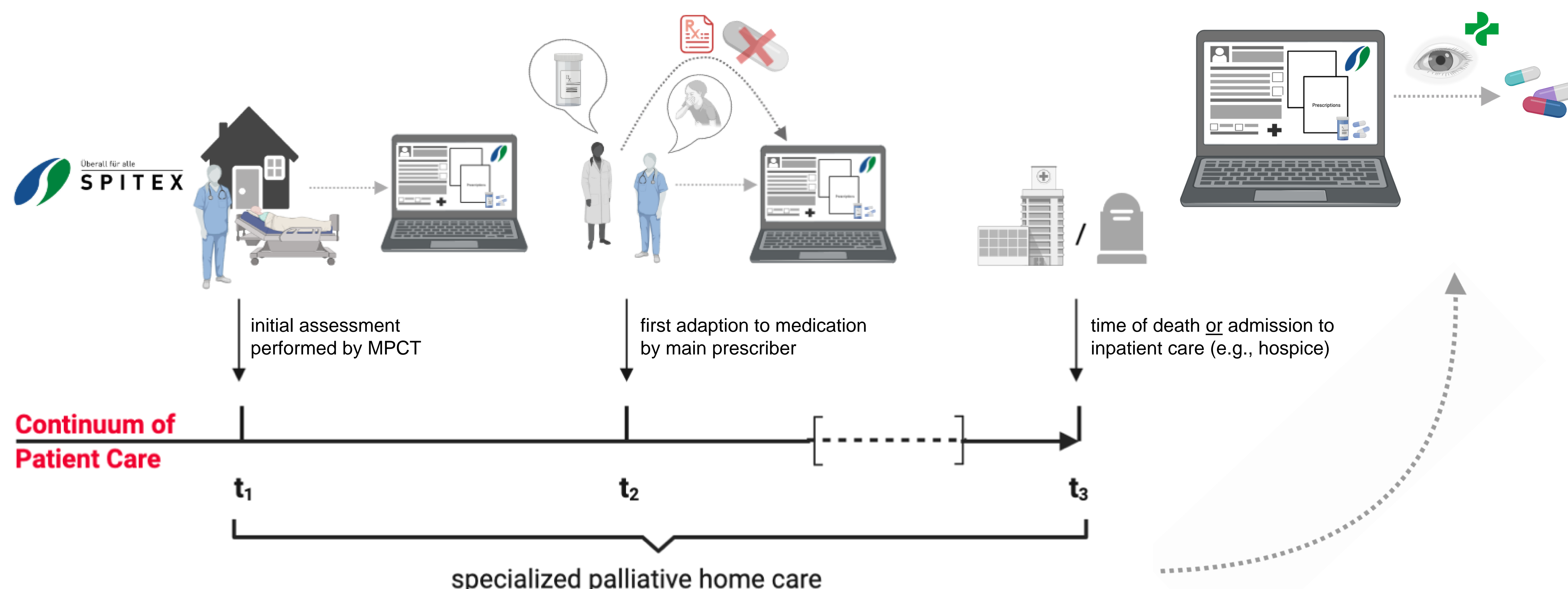

Figure: Pre-defined points in time for medication analysis (regular, PRN) and STOPP-Frail criteria assessment along continuum of patient care

Significance

This pilot study will provide an **overview of medication-related aspects in an outpatient specialized PC setting** and will help to identify possible **contributions of pharmacists to medication safety**. Highlighting the opportunities of the pharmacist in specialized palliative home care could pave the way to implement the pharmacist in the interprofessional PC team in Switzerland.

References

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