## **ABSTRACT**

Analysis of drug-related problems in healthcare facility VIII

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**Backgroung**: Drug-related problem (DRP) is according to Pharmaceutical Care Network Europe (PCNE) pharmacotherapy related event or circumstance, which actually or potentionaly interfer with a terapeutic purpose. Pharmacists tend to be part of multidisciplinar teams, they help with decisions concerning therapy of the patient, monitoring, participating in the detection of DRPs and by that helping increase effect and safety of pharmacotherapy.

**Aim**: The aim of the theoretical part of this thesis is to cteate summary of DRPs which occurs in antidepressant drug group, ATC N06A, and classify these problems using PCNE V5.01 classification. The aim of the practical part of this thesis is to detect DRPs in healthcare facility, classify these DRPs using PCNE V5.01 classification and assess their relevance and acceptance of interventions made by clinical pharmacist.

**Methodology**: The data were collected since February 7<sup>th</sup> to March 7<sup>th</sup> 2022 at hospital in the Czech republic. In total it was collected data from 68 patients. Source of DRPs, their relevance and suggested interventions were documented made by clinical pharmacist. DRPs were classified by PCNE V5.01 and acceptance of suggested interventions was added. The data were analysed by descriptive statisticts.

**Results**: It was collected data from 68 patients, 49 women and 19 men. Average age was 79,54  $\pm$  7,73 years and patients average used 9,2  $\pm$  2,9 drugs. It was identified 162 DRPs, which is average 2,4 problems to one patient. The most frequent DRPs were classified as drug choice problem (50,0 %). More specifically no drug prescribed even with clear indication and no clear indication for drug use. Second most frequent were dosing problems (22,8 %). More specifically drug dose too high and wrong dose scheme or timing of drug. Almost half of the problems (48,8 %) were reviewed as medium relevance, 3,1 % of DRPs were reviewed as obligatory. Acceptance of interventions made by clinical pharmacist were 93,21 %.

**Conclusion**: DRPs occur quite offten. Presence of clinical pharmacist in decisions about patients pharmacotherapy and its adjustments may lead to their minimisation.

**Key words:** drug-related problems, PCNE classification, antidepressant drugs, healthcare facility, clinical pharmacy