

AB149. 57. Proton pump inhibitor prescribing: an audit of a colorectal ward in the Mater Misericordiae University Hospital in 2017

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Background: Proton pump inhibitors (PPIs) are extremely effective and useful drug therapies. However recently there has been growing concern in relation to the side effect profile. They are linked to increased risk of infection, electrolyte imbalances, dementia and kidney disease. There is also considerable financial implication when prescribed inappropriately.

Methods: An audit was performed in 2017 in Mater Misericordiae University Hospital (MMUH) on St. Monica's Ward, an acute 30-bed colorectal ward. Data was collected from kardex and medical notes of all inpatients on the ward. Data such as demographics, drug choice and dose, commencement in hospital, co-existing prescription of any high risks drugs and medical indication for the use of PPIs were included. Emails were circulated highlighting the Mater Guidelines on correct prescribing of PPIs. The results of the audit were also presented at grand rounds and again correct prescribing guidelines were highlighted. Reaudit was then performed some months later from the same ward.

Results: Seventeen of the 30 patients on the ward were

prescribed PPIs and of these 88% were on full dose regime. Forty-seven percent of patients had an identifiable indication for treatment. In the reaudit 19 out of 28 patients were prescribed PPIs with 63% having an indication for treatment. All were receiving treatment dose regime. This audit demonstrates that PPIs are a commonly prescribed class of drugs in MMUH. While the majority of patient had an indication for treatment there was unnecessary prescribing of treatment dose regimes as opposed to prophylactic regimes. Unfortunately despite best efforts to highlight the risks and education around correct prescribing, the reaudit demonstrated that patients continue to be prescribed treatment dose regimes.

Conclusions: PPIs are a useful and effective drug therapy however they have been linked to increased risk of infection, dementia and Kidney disease. In light of this we aimed to establish the culture of prescribing on an colorectal ward in MMUH. This audit demonstrates that overprescribing is an issue and in particular prescribing at higher doses than indicated. Further evaluation is required and auditing of additional wards has been performed to increase sample size. More education is required to ensure that patients with the correct indications receive the right drug, at the right dose in order to optimize their treatment and minimize their risk of developing complications.

Keywords: Proton pump inhibitors (PPI); prescribing; pattern

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