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Assessment of drug related problems among patients with type-2 diabetes

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Diabetic patients usually have co-morbidities requiring the use of multiple medications, making them more vulnerable in experiencing Drug Related Problems (DRPs). The objective of this study was to assess DRPs in Type-2 Diabetes (T2D) patients and factors associated with its occurrence. A cross-sectional study was conducted among T2D patients who were attending a Tertiary Care Teaching Hospital, Lebanon. The identification and assessment of DRPs were based on the Pharmaceutical Care Network Europe tool version 8.03. The total number of DRPs was 313 with a mean of 2.05-1.03 per patient. The most common DRPs encountered were adverse drug event (31.3%), untreated symptoms or indication (10.54%), effect of drug treatment not optimal (7.34%) and high drug dose (7.34%). Logistic regression showed that polypharmacy and several comorbidities such as stroke, heart failure, renal and liver impairment were common factors significantly associated with different types of DRPs ($p < 0.005$). The risk of having problems “no effect of drug treatment” and “effect of drug treatment not optimal” was significantly decreased in patients with normal HbA1c. The use of sulfonylurea increases the risk of “inappropriate duplication of therapeutic group” by 12.6 times ($p = 0.040$). Following a low sugar diet showed to decrease the probability of having problem. Patient uses/takes more drug than prescribed” by 92.8%. On the other hand, insulin administration showed to increase 13.4 times this probability ($p = 0.006$). Early identification of DRPs and factors associated with them are essential to prevent and resolve them in diabetic patients by engaging clinical pharmacist.

Biography

Amena Aidibi has completed her Masters in Clinical Pharmacy and Pharmacoepidemiology, from Lebanese University, Lebanon.

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