

Medicines Optimisation and Review

- An important and necessary part of the prescribing process.
- An opportunity to evaluate the risks and benefits associated with a patient's medicine regimen.
- An opportunity to reach an agreement with a patient about a treatment plan.
- An opportunity to reduce medicines waste.

Key steps in optimising medicines include:

INFORMATION GATHERING	1.	Patient assessment <ul style="list-style-type: none"> • Consider patient factors which may impact on safe medicines management such as <ul style="list-style-type: none"> ○ complex dosage regimen ○ poor dexterity/eyesight ○ swallowing difficulties ○ confusion/memory problems/depression ○ over-ordering/hoarding of medicines
	2.	Therapeutic Goals <ul style="list-style-type: none"> • Determine goals/priorities of care with patient/whanau/carer
	3.	Accurate Medicine list <ul style="list-style-type: none"> • Ask to see ALL the patient's medicines. • What medicines/doses is the patient actually taking? (include prescription, over-the counter & complementary) • Does this differ from what you thought?
CLINICAL DECISION MAKING	4.	Correlate <ul style="list-style-type: none"> • Match current medicines with medical classifications/indications.
	5.	Assess medicines & consider <ul style="list-style-type: none"> • Patient factors (step 1 above). • Functional factors eg renal function • Adverse reactions (present, risk) • Indications (treatment target, time to benefit, consistent with goals) • Interactions (actual or potential) • Adherence with agreed medicine regimen.
	6.	Optimise medicines with net benefit <ul style="list-style-type: none"> • Optimise dose and frequency of dosing. • Simplify administration regimen
	7.	Discontinue medicines without net benefit <ul style="list-style-type: none"> • Prioritise & aim to discontinue one at a time starting with medicines most likely to contribute to adverse effects. • Gradually wean medicines likely to cause withdrawal symptoms.
MONITOR	8.	Monitor <ul style="list-style-type: none"> • Changes to medicine regimen • Patient understanding/adherence with agreed medicine regimen • Adverse events • Laboratory parameters • Achievement of care goals
COMMUNICATE	9.	Communicate and Document <ul style="list-style-type: none"> • Update records on PMS.(medicines, classifications) • Provide clear written instructions/guidance on doses so containers can be clearly labelled. • Assess the appropriateness of repeat prescribing without a consultation. • Provide an updated medicines list to patient. • Communicate to other prescribers. • Involve other clinicians to support safe medicine management e.g. pharmacists