

Anticoagulants safety in clinical practice

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Abstract

Introduction: Anticoagulants are a mainstay of clinical medicine worldwide, and many are cheaply available and present on the WHO's list of essential medicines for a public healthcare system. Anticoagulants function to reduce the clotting time of blood, which can be useful to reduce the risk of thromboembolism, deep vein thrombosis and pulmonary embolism, amongst other conditions.

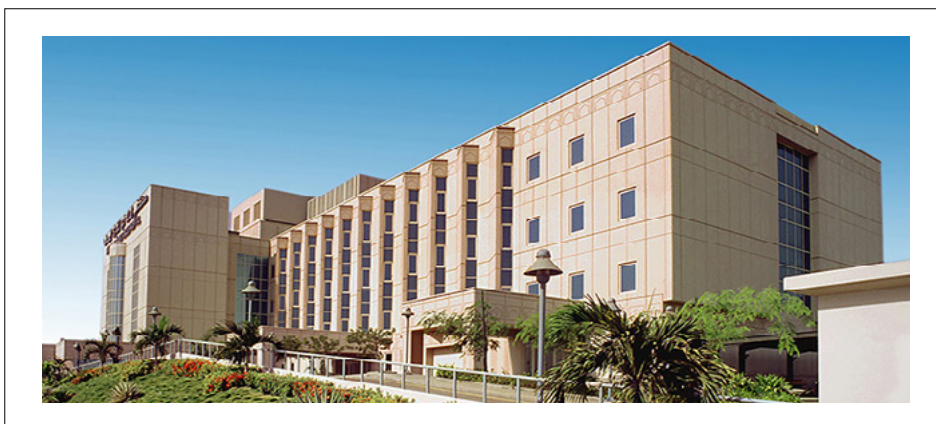
Methodology: This study is a retrospective audit of patient healthcare records in an NHS trust in the East of England. Specifically, self-reported records concerning patient safety incidents involving anti-coagulants that occurred between the 1st of April 2014 and the 29th of March 2017. All anti-coagulant safety incidents were identified, extracted and anonymised by the trust's chief pharmacist, a member of the trust's patient safety department. This was done with the consent of the relevant trust authorities before being released to participating researchers. Although such studies do not require prior ethical approval from the university ethics boards, all aspects of the study were carried out in adherence to ethical guidelines relevant to the best practice in clinical medicine. Each incident record included: a report identifier (number); the incident date; the hospital department where the incident occurred; the medication; the route of drug administration; the stage of medication error; the type of medication error and a description of it; the severity of the incident (graded from "No harm" to "catastrophic"). Medication errors stages were categorised as relating to administration, dispensing, prescribing, and monitoring, as similarly done by the NPSA guidelines. Actual and potential harm were classified as: no harm, low, minor, moderate, severe or catastrophic. Data were analysed in Microsoft excel and Statistical Package for the Social Sciences (SPSS), with graphics being generated in Microsoft excel.

Results: In total, 232 incidents concerning anti-coagulants were identified during the period of the study 50% of all errors (n = 116 incidents) occurred during the medication administration stage, followed by prescribing errors (36%). Omission errors were the most common, accounting for 34% of all errors (n=77), followed by incorrect dosing (n=29, 13%), and double dosing (n=26, 11%). Dalteparin was found to be the medicine most often associated with medication errors, being responsible for 117 (50%) of the incidents, followed by Warfarin, which accounted for 22% (n=52), whilst Heparin was associated with 27 incidents (12%) of the total.

Conclusion: Anticoagulants are important medications to diverse clinical fields and their safe use is paramount to ensure patient safety and welfare.

Biography

Bader AlHassoun is working as a Supervisor of Emergency Pharmacy at Prince Sultan Military Medical City, Saudi Arabia.



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