

## Are we providing patient centred care approach?

Viviane Khalil<sup>1,2</sup>, Jan deClifford<sup>1</sup>, Skip Lam<sup>1</sup>, Stefanie Stattmann<sup>3</sup>

1. Peninsula Health, Pharmacy Department, 2 Hastings Road, Frankston, Vic 3199, Australia.

2. Monash University, School of pharmacy Postgraduate Studies and Professional Development Unit, Parkville, Vic 3052, Australia.

3. Karl-Franzens-University. Institute of Pharmaceutical Science. Graz, Austria.

### Background:

1. Appropriate anticoagulation therapy (AT) in patients with Non valvular atrial fibrillation (AF) is paramount to morbidity and mortality reduction.
2. A patient centred care approach (PCCA) has the potential to further optimise health outcomes.

### Aims:

1. To evaluate the appropriateness of AT for inpatients with newly diagnosed AF.
2. To determine the level of patients' satisfaction with information provided and their involvement in decision making relating to their AT.

### Method:

1. Key stakeholders were invited to a project working group to ensure broad input and support for the study.
2. A prospective 3 month quality file audit of consecutive newly admitted patients for AF management was undertaken from August till November 2016 . Data collected included: patient demographics, relevant comorbidities and AT.
3. Descriptive analysis of variables pertinent to AF was undertaken.
4. Appropriateness of anticoagulant prescribing was independently examined by two clinically experienced pharmacists and evaluated against the current CHEST prescribing guidelines for AF<sup>1</sup>.
5. Patients' satisfaction with information provided and involvement in their management was evaluated by a questionnaire at discharge.

### Results:

1. Eighty eight patients were included in the study. Patients' characteristics were: mean age (SD) of 75 (12.3) years, mean CHA<sub>2</sub>DS<sub>2</sub>-VASc Score (SD) of 3 (1.55), mean Hasbled score (SD) of 2 (1.18) and mean Charlson Comorbidity Index (SD) of 2 (1.97). (Refer to Table 1).
2. Of the 73% (n=64) of patients who were prescribed AT, apixaban and rivaroxaban were most commonly prescribed (83%, n=53).

3. Eighty percent (n=70) of patients included in the study were prescribed appropriate AT. Refer to Figure 1.
4. Of the interviewed patients, 83% (43/52) were satisfied with their involvement; however, only 58% (30/52) felt they were included in the decision-making process.

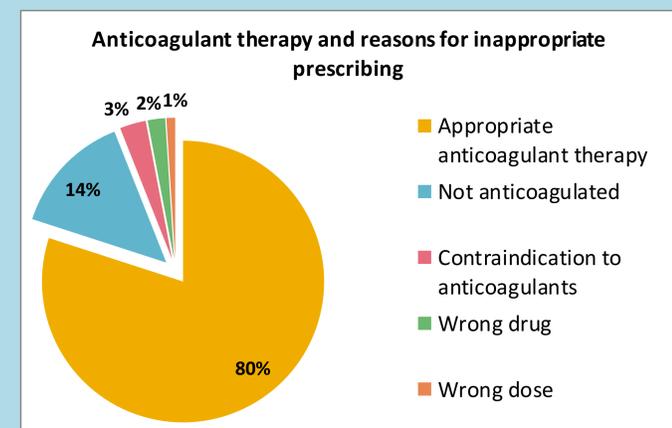
### Limitations of the study:

1. Small study sample conducted in a single centre study may not be a representative of the general population.
2. Incomplete documentation in the medical histories may have affected results.

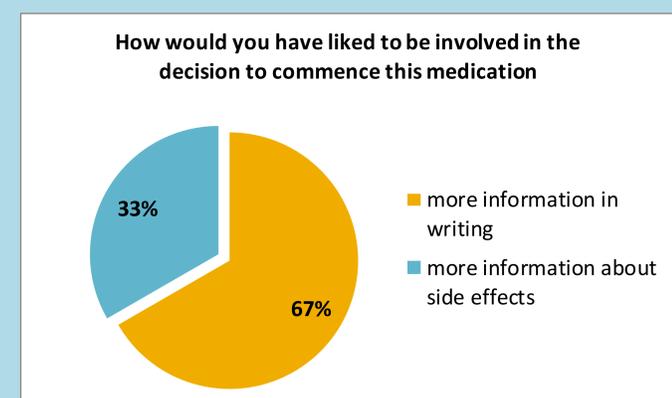
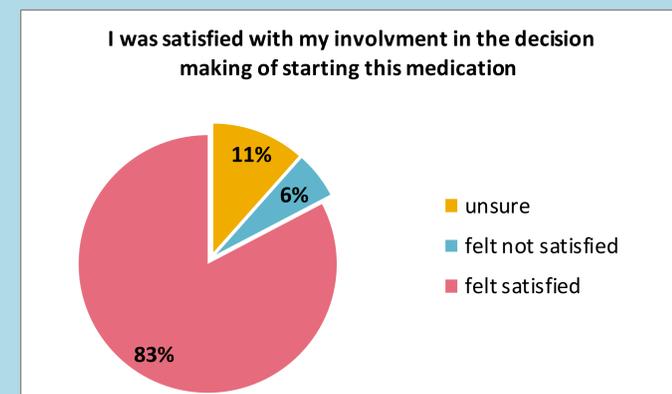
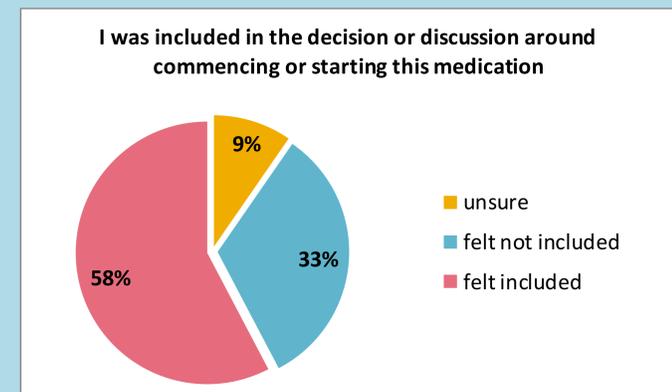
**Table 1: Patients' characteristics in the study**

Patients' Demographics	n(%) n=88
Male	46(52%)
Female	42(48%)
Age	
Mean age SD (yrs)	75(12.3)
<65	21(24%)
65-74	22(25%)
≥ 75	45(51%)
<b>Creatinine Clearance (ml/min/1.73m<sup>2</sup>)</b>	
CrCl < 29	5(6%)
CrCl 30-50	15(17%)
CrCl >51-60	68(77%)
<b>HAS-BLED score</b>	
0 - 1	22(25%)
2 - 4	62(70%)
> 4	4(5%)
<b>CHA<sub>2</sub>DS<sub>2</sub> VASc score</b>	
0 - 1	13(15%)
2 - 4	59(67%)
> 4	16(18%)
<b>Charlson Comorbidity Index</b>	
0 - 1	39(44%)
2 - 4	39(44%)
> 4	10(11%)

**Figure 1: Percentage of patients prescribed appropriate AT and reasons for inappropriate therapy.**



### Patient satisfaction survey



### Conclusion:

- This study demonstrates that clinicians have embraced the prescribing guidelines of AT.
- Gaps identified include highlighting the importance of a PCCA in AF.
- As a result, the project working group is developing and piloting strategies to improve patients' involvement in their care.

### Reference

1. You et al, Antithrombotic Therapy for Atrial Fibrillation, Antithrombotic Therapy and Prevention of Thrombosis, 9th ed: American College of Chest Physicians Evidence-Based Clinical Practice Guidelines. CHEST 2012; 141(2) (Suppl):e531S–e575S.