

Impact of Pharmacist-led Anticoagulation Clinic at Pamela Youde Nethersole Eastern Hospital on Patients' Anticoagulation Control and Clinical Outcomes

Mak Chu Fai Trevor
Pharmacist
PYNEH



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Background

Anticoagulants:

- Have narrow therapeutic ranges
- Have high potential for complications
- Numerous factors influence drug effects

Benefits of Pharmacist-led anticoagulation management

1. Reduce bleeding and thromboembolic events
2. Improve INR control
3. Shorten hospital stay and reduce healthcare cost

Ellis RF, Stephens MA, Sharp GB. Am J Hosp Pharm 1992;49:387-94

Wilt VM, Gums JG, Ahmed OI et al. Pharmacotherapy 1995;15:732-9.

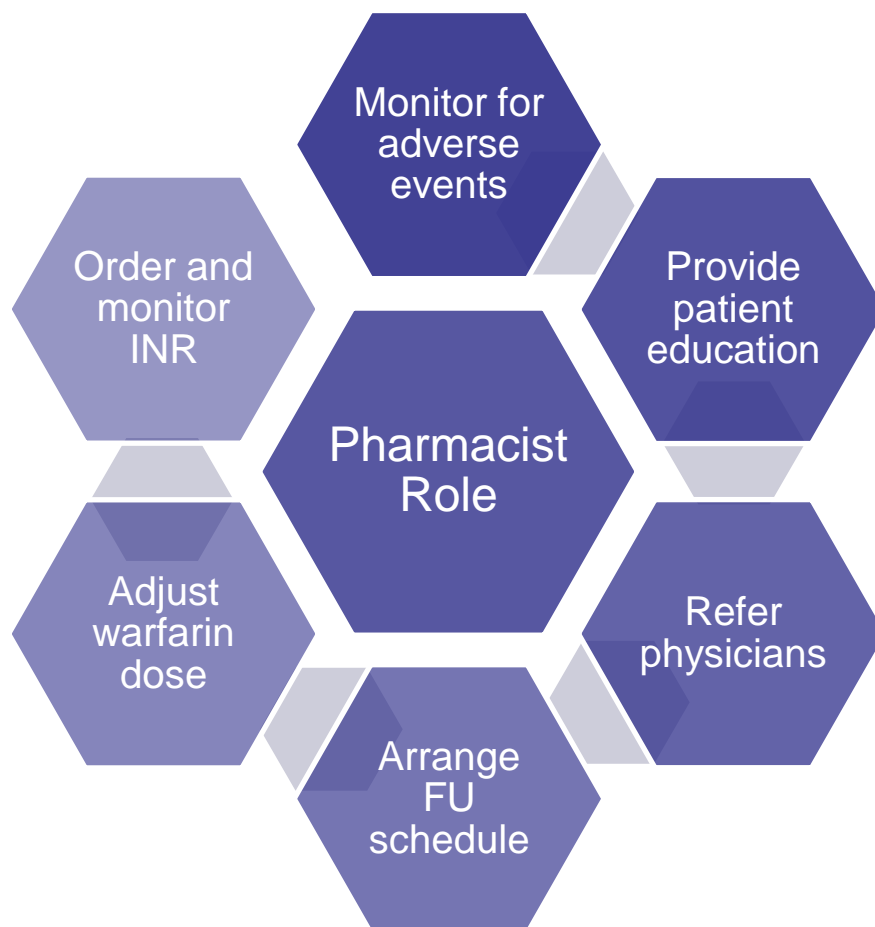


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Pharmacist-led Anticoagulation Clinic in PYNEH



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Results

Workload	
No. of new cases referred in	80
No. of appointments seen	175
No. of cases referred back to physicians	18

Bleeding events	No.
Anticoagulation related AE visits	3
Anticoagulation related hospital admission	3
No. of bleeding events	3

INR results	No. (%)
Total number of INR ordered	168
Percentage of INRs within target range ± 0.2	122 (72.62)

3 related AE visits

1. Post menopausal PV bleed at INR: 2.4
2. Subconjunctival haemorrhage at INR: 3.4

3 related admission

- 2 patient admitted for observation due to supratherapeutic INR

1 Fatal Bleeding

A 82 y/o male suffered ICH at INR: 3



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Conclusions

- Anticoagulation Control in our clinic:
 - Time-in therapeutic Range (TTR): 63.23%
 - Expanded TTR (INR range \pm 0.2): 78.41%

Comparable with local prospective randomized trial in 2006:

- TTR: 61% Expanded TTR: 77%

Chan FWH, et al. Br J Clin Pharmacol 2006; 62: 601–9

Comparable with overseas study

- TTR: 40-64% Expanded TTR: >75%

Chiquette E, et al. Arch Intern Med 1998; 158: 1641–7.

Garabedian-Ruffalo SM, et al. Am J Hosp Pharm 1985; 42: 304–8.



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