

Parkinson's Disease and Time-Critical Medications: Patient Experience and Staff Awareness



ST VINCENT'S HOSPITAL
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A FACILITY OF ST VINCENT'S HEALTH AUSTRALIA

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Background

Parkinson's disease (PD) is a progressive neurological condition for which there is currently no cure. PD causes a range of symptoms such as slowness, tremor, depression, anxiety, sleep problems and pain.



Medicines for PD provide symptom relief, but regimens are complex and considered 'time critical'. An administration delay of even 15 minutes may cause significant deterioration. In addition, dopamine antagonists, like common anti-emetics prescribed routinely after surgery, can significantly worsen PD symptoms.

Up to one quarter of patients with PD are hospitalised each year¹. Unfortunately, there can be a lack of understanding about PD medication management amongst health service staff. Failure to manage PD medications well during an admission results in avoidable deterioration and an increased length of stay².

Aim

To investigate patient experience associated with the diagnosis of PD and the management of PD in hospital, and to investigate medical, nursing and pharmacist awareness of medication risks associated with PD.

Method

Two campuses of this health service were included. Two survey templates were developed and used.

Stories and feedback from 14 patients and their carers



Interviews conducted with 11 doctors, 79 nurses and 22 pharmacists.

Consumer interviews:

Current acute, sub-acute or Movement Clinic patients with a pre-existing diagnosis of PD and/or their carers were interviewed.

A verbal survey was used in the interview, including:

- the patient's PD diagnosis experience
- medication management at home
- medication management in hospital
- how health service staff could do better

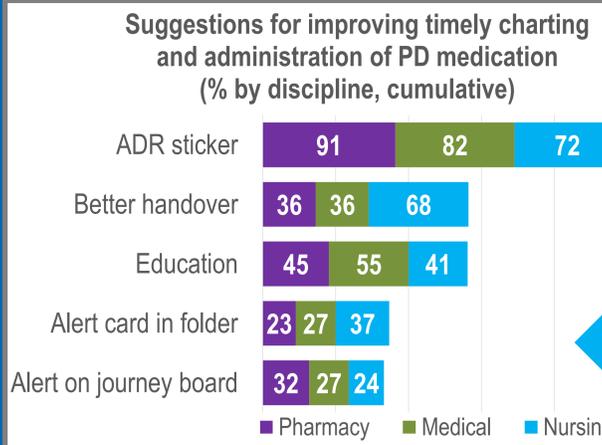
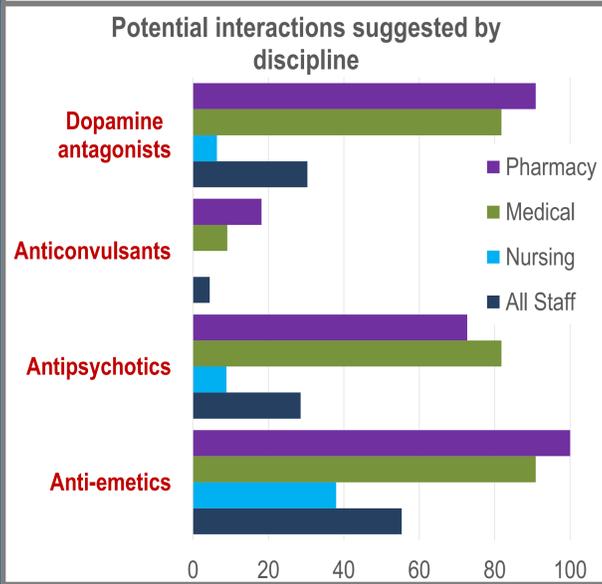
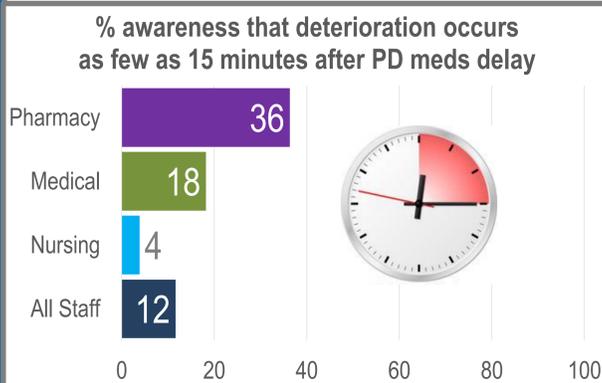
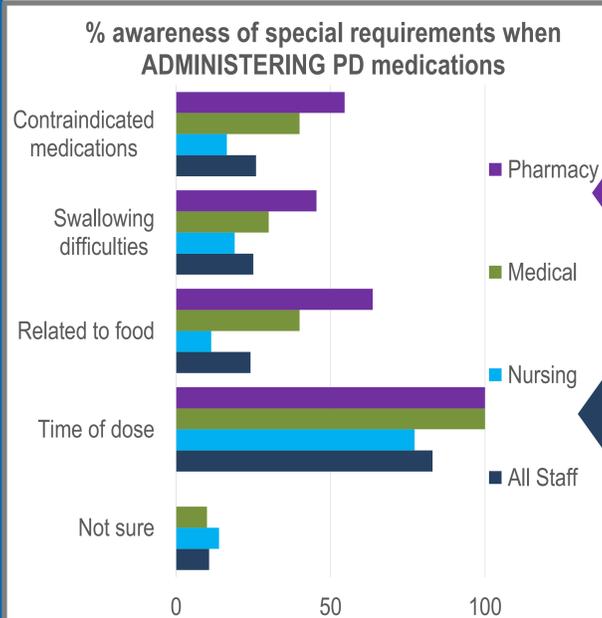
Clinician interviews:

Doctors, nurses and pharmacists were interviewed for awareness of medication risks associated with PD.

A verbal survey was used in the interview, including:

- prescribing and charting issues
- medication contraindications in PD
- the importance of administration times
- how to minimise errors

Results



Conclusion

Engaging earlier with patients, multidisciplinary education, prompts and reminder tools may reduce the risk of avoidable deterioration of patients with PD, improve quality of care and reduce length of stay.

References

¹Gerlach et al. Deterioration of Parkinson's disease during hospitalization: survey of 684 patients. BMC Neurology 2012 12:13.
²Unax Lertxundi et al. Medication errors in Parkinson's disease inpatients in the Basque Country. Parkinsonism and Related Disorders 36 (2017) 57e62



I always felt it was a burden to buzz the nurse to bother them for tablets

91 % of pharmacists ask the patient about their individual dosing times, compared with 66% of nurses and 73% of doctors.

8 patients were **not** asked about PD meds on admission, 7 had their dosing times corrected upon reconciliation. Two were given meds at the wrong time for > 24 hours. Some experienced discomfort/tremor but didn't tell staff. One patient reported deterioration to staff. One carer intervened and gave the late medication.

My body tells me... it starts to freeze 15 minutes after a medication delay... late by two hours and it gets very bad

I remember giving a patient their medication half an hour late and their Parkinson's had become very bad

They were treating Mum like a dementia patient. She was walking around the wards not making any sense. When I got there, I asked if they had been giving her the Parkinson's medication. She was completely delirious and they didn't even know it was a side effect (of missing her medications)

I didn't know that Maxolon couldn't be given

They weren't organised enough to ask enough questions about medication...like chickens with their heads chopped off running around

A sticker prompt was considered the best intervention to improve timely charting and administration

68 % of nurses thought **handover reminder tools** would reduce missed or late doses

When Mum started her Parkinson's medication she started to smile again

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