

Quelques références pour aller plus loin ...

A l'occasion de la Semaine de la Sécurité des Patients 2015, l'OMEDIT Midi-Pyrénées vous propose des documents sur la Conciliation Médicamenteuse. Vous trouverez ici des liens vers des documents et des outils concernant la conciliation médicamenteuse, en France et à l'étranger.

1. Problématique

- Medication reconciliation in the acute care setting: opportunity and challenge for nursing. Sullivan C et al. Journal of Nursing Care Quality 2005; 20: 95-98.
- Reconcile medication at all transition points. IHI Patient Safety Medication Systems Changes. Cambridge, MA, Institute for Healthcare Improvement
- Approaches for improving continuity of care in medication management :a systematic review. Spinewine A et al., Int J Qual Health Care 2013;25:403-17. doi:10.1093/intqhc/mzt032. Accessible sur : <http://intqhc.oxfordjournals.org/content/intqhc/25/4/403.full.pdf>
- Medication Reconciliation in the Hospital: What, Why, Where, When, Who and How? Fernandes et al., Healthcare Quarterly, 2012:42-49. doi:10.12927/hcq.2012.22842. Free full text : <http://www.longwoods.com/content/22842>
- Conciliation des traitements médicamenteux en gériatrie : Pertinence et faisabilité. Boissinot et al., Pharmactuel 2014;47(2).
- Medication reconciliation: passing phase or real need? Duran-Garcia E et al., Int J Clin Pharm. 2012;34:797-802. doi:10.1007/s11096-012-9707-2.
- Preventing medication errors in transitions of care : A patient case approach. Johnson A. et al., J Am Pharm Assoc 2015;55:e264-e276. doi:10.1331/JAPhA.2015.15509. Free full text : http://japha.org/data/Journals/JAPhA/933566/JAPhA_55_2_e264.pdf
- Using Medication Reconciliation to prevent errors. The Joint Commission. 2006;35. Accessible sur : http://www.jointcommission.org/assets/1/18/SEA_35.pdf
- Hospital-Based Medication reconciliation Practices. A systematic review. K.Mueller S et al., Arch Intern Med 2012;172:1057-1069. doi:10.1001/archinternmed.2012.2246. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3575731/>
- Improving medication safety during hospital-based transitions of care. Sponsler KC et al., Cleve Clin J Med. 2015;82:351-60. doi:10.3949/ccjm.82a.14025. Free full text available on: http://www.ccjm.org/view-pdf.html?file=uploads/media/Sponsler_MedicationSafety

2. Recommandations

Recommandations nationales

- **Rapport IGAS 2011** : http://www.igas.gouv.fr/IMG/pdf/Circuit_du_medicament.pdf
- **Certification V2014** : Manuel : http://www.has-sante.fr/portail/upload/docs/application/pdf/2014-03/manuel_v2010_janvier2014.pdf

Recommandations internationales

- **Expérimentation High 5's** (2010-2015) : tous les documents sont disponibles sur le site de la HAS : http://www.has-sante.fr/portail/jcms/r_1498429/fr/l-initiative-oms-high-5s

3. Conciliation médicamenteuse en pratique

Outils

- Calgary Health Region Form, 2006: Best Possible Medication History Hospitalist Program Medication Reconciliation. This form is designed to enhance reconciliation of home medications upon admission to the hospital. It is to be used by physicians, nurses and pharmacists throughout the patient's hospital stay.
- A medication reconciliation form and its impact on the medical record in a paediatric hospital. Bedard P et al., J Eval Clin Pract. 2011;17:222-7. doi:10.1111/j.1365-2753.2010.01424.x. Accessible sur: <http://onlinelibrary.wiley.com/doi/10.1111/j.1365-2753.2010.01424.x/epdf>
- Results of the Medications At Transitions and Clinical Handoffs (MATCH) Study: An Analysis of Medication Reconciliation Errors and Risk Factors at Hospital Admission. Gleason et al., J Gen Intern Med. 2010;25:441-7. doi:10.1007/s11606-010-1256-6. En free full text sur pubmed : <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2855002/>
- Medication Reconciliation to prevent Adverse Drug Events: <http://www.ihl.org/Topics/ADEsMedicationReconciliation/Pages/default.aspx>
- Outil MATCH (mis au point par le Northwestern Memorial Hospital à Chicago): <http://www.ahrq.gov/sites/default/files/publications/files/match.pdf>

Apport de l'informatisation

- An end-to-end hybrid algorithm for automated medication discrepancy detection. Li Q et al., BMC Med Inform Decis Mak. 2015;15:37. doi:10.1186/s12911-015-0160-8.
- Prescription Extraction from Clinical Notes: Towards Automating EMR Medication Reconciliation. Wang Y et al., AMIA Jt Summits Transl Sci Proc. 2015;2015:188-93. eCollection 2015. Free full text on pubmed : <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4525262/>
- Meaningful use of electronic health records: experiences from the field and future opportunities. Slight SP et al., JMIR Med Inform. 2015;3:e30.

doi:10.2196/medinform.4457. Free full text ici:

http://medinform.jmir.org/article/viewFile/medinform_v3i3e30/2

- Electronic medication reconciliation and medication errors. Hron JD et al., Int J Qual Health Care. 2015;27:314-9. doi:10.1093/intqhc/mzv046.
- Does electronic medication reconciliation at hospital discharge decrease prescription medication errors? Allison GM et al., Int J Health Care Qual Assur. 2015;28:564-73. doi:10.1108/IJHCQA-12-2014-0113.
- Impact of electronic medication reconciliation at hospital admission on clinician workflow. Vawdrey DK et al., AMIA Annu Symp Proc. 2010;2010:822-6. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3041362/>
- Automatic detection of omissions in medication lists. Hasan S et al., J Am Med Inform Assoc. 2011;18:449-58. doi:10.1136/amiajnl-2011-000106. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3128402/>
- Report of the 2013 AMCP Partnership Forum on electronic solutions to medication reconciliation and improving transitions of care. AMCP Partnership Forum. J Manag Care Spec Pharm. 2014;20:937-47. Accessible sur: <http://www.amcp.org/WorkArea/DownloadAsset.aspx?id=18471>

Lien Ville/Hôpital

- Medication review and reconciliation with cooperation between pharmacist and general practitioner and the benefit for the patient: a systematic review. Geurts MM et al., Br J Pharmacol. 2012;74:16-33. doi:10.1111/j.1365-2125.2012.04178.x. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3394125/>
- Implementation and evaluation of a community-based medication reconciliation (CMR) system at the hospital-community interface of care. Bailey AL et al., Health Q. 2009;13:91-7
- MedIntegrate: Incorporating provincially funded community pharmacist services into an ambulatory internal medicine clinic to enhance medication reconciliation. Tomas M et al., Can Pharm J (Ott). 2014;147:300-6. doi:10.1177/1715163514544902.
- Impact of drug reconciliation at discharge and communication between hospital and community pharmacists on drug-related problems: study protocol for a randomized controlled trial. Pourrat X. et al., Trials. 2014;15:260. doi:10.1186/1745-6215-15-260. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4226949/>

Impact de la conciliation médicamenteuse

- Conciliation médicamenteuse de sortie en gériatrie : impact de la transmission hôpital-ville d'un bilan médicamenteux sur le maintien des optimisations thérapeutiques. Thèse UFR Pharmacie Grenoble. M. Moulis-Rivière. Pharmaceutical sciences. 2014. <dumas-01021330>
- Évaluation de l'impact clinique de la réalisation d'un bilan comparatif des médicaments au Centre hospitalier affilié universitaire de Québec. Blanchet M. Pharmactuel 2010;43(3).

- Prescribing errors on admission to hospital and their potential impact: a mixed-methods study. Basey AJ. et al., BMJ Qual Saf. 2014;23:17-25. doi:10.1136/bmjqs-2013-001978. Accessible sur : <http://qualitysafety.bmj.com/content/23/1/17.full.pdf+html>
- The effect of the COACH program (Continuity Of Appropriate pharmacotherapy, patient Counselling and information transfer in Healthcare) on readmission rates in a multicultural population of internal medicine patients. Karapinar-Carkit F et al., BMC Health Serv Res 2010;10:39. doi:10.1186/1472-6963-10-39. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC2843699/>

Impact du pharmacien

- Impact of pharmacist involvement in the transitional care of high-risk patients through medication reconciliation, medication education, and postdischarge call-backs (IPITCH Study). Phatak A et al. J Hosp Med. 2015. doi: 10.1002/jhm.2493. [Epub ahead of print]. Free full text available on: <http://onlinelibrary.wiley.com/doi/10.1002/jhm.2493/epdf>
- Impact of students pharmacists on the medication reconciliation process in high-risk hospitalized general medicine patients. Lancaster JW et al., Am J Pharm Educ. 2014;78:34. doi:10.5688/ajpe78234. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC3965142/>
- Pharmacist- versus physician-initiated admission medication reconciliation: impact on adverse drug events. Mergenhagen et al., Am J Geriatr Pharmacother 2012;10:242-50. doi: 10.1016/j.amjopharm.2012.06.001
- Improving Patient's Primary Medication Adherence: The Value of Pharmaceutical Counseling. Leguelinel-Blache G et al., Medicine (Baltimore). 2015;94:e1805. doi:10.1097/MD.0000000000001805. Free full text on pubmed: <http://www.ncbi.nlm.nih.gov/pmc/articles/PMC4616785/>
- Clinical and Financial Impact of Pharmacist Involvement in Discharge Medication Reconciliation at an Academic Medical Center: A Prospective Pilot Study. Sebaaly J et al., Hosp Pharm. 2015;50:505-13. doi:10.1310/hpj5006-505