



Professor dr. A van der Heiden

Dr. L van Zuylen Drs . E Geijteman

Professor dr. E van Leeuwen

Dr. W Dekkers Dr. M Dees

Professor dr. Zuurmond

Dr. R Perez Drs. B Huisman





Medication management in the last phase of life

A mixed methods research

Dr. Marianne Dees, general practitioner Drs. Eric Geijteman, oncologist i.o. Drs. Bregje Huisman, anaesthesiologist





Aim of the project

To gain insight into current practices of medication management in the last three months of life and to design a draft guideline







Introduction

- Patients in the last stage of life are prone to polypharmacy
- · At the end of life medication should be evaluated on its merits
- · No guidelines about medication management in the last stage of life
- · Little is known about every day practice
- Little is known about norms and valuations of patients, relatives, nurses, physicians





MEDILAST

• Phase 1 Retrospective patient file analysis

Phase 2 Qualitative in-depth interviews

Phase 3 Quantitative questionnaires specialists and general practitioners

• Phase 4 Delphi procedure based on the results phase 1-3





Research questions phase 2

- 1. What are the current practices of medication management in the last three months of life?
- 2. What are the norms and values of the participants?







Design phase 2

- · A multicenter study
- In-depth interviews
- Patients, relatives, nurses, specialists and general practitioners
- Constant comparative method
- Software program ATLAS-ti
- · Eighteen casus
- University hospital, a regional hospital, two hospices and primary care





ZonMw

Results

- 17 patients
- 11 relatives
- 14 nurses
- 16 specialists
- 13 general practitioners







Patiënt characteristics

• Sex 9 male, 8 female

• Age 47 – 91 years

Diagnose cancer, kidney failure, COPD, ileus, heart failure, ALS, old age

Education
 1 university, 4 high, 4 middle, 6 low, 2 none

Background
 12 Dutch, 2 German, 2 French, 1 Turkish,1 Suriname

Religion 7 none, 6 catholic , 1 protestant , 1 reformed , 1 bud dhism, 1 Muslim,

Settings 7 home, 4 high-care hospice, 6 hospital

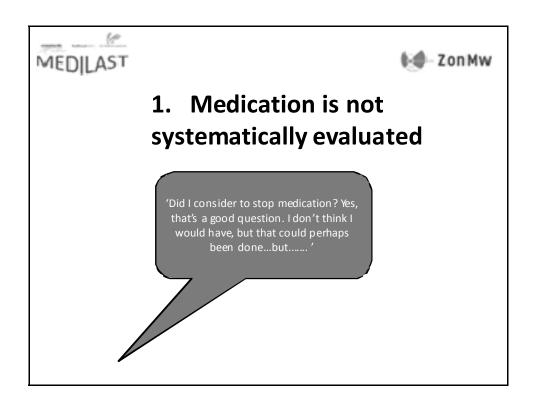
Survival 5 -96 days, median 35 days, 4 still alive

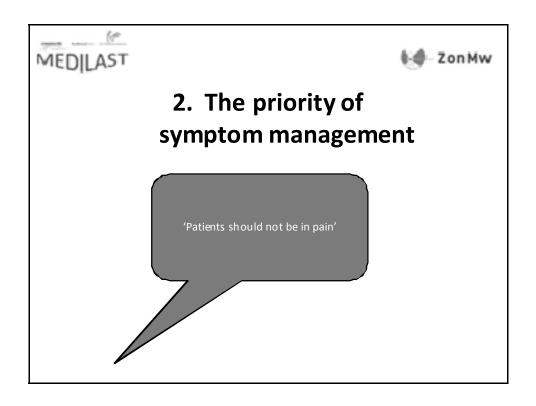


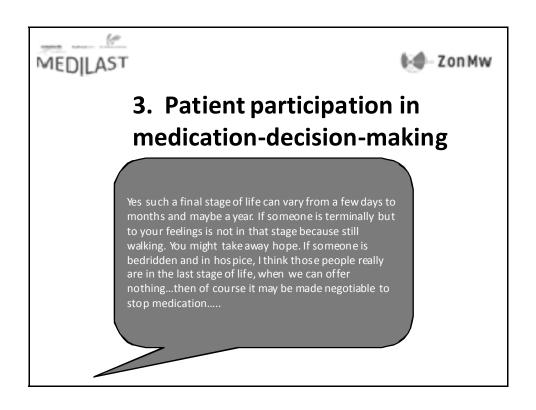
Themes daily practice medication management



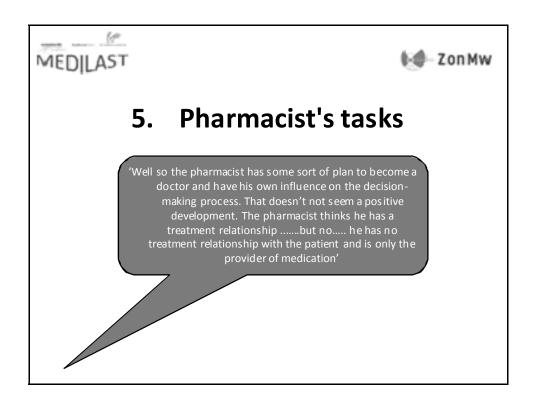
- 1. Medication is not systematically evaluated on its merits
- 2. The priority of symptom management
- 3. No routine in patient participation in medication-decision-making
- 4. Lack of agreement on responsibility co-morbid disease medication
- 5. Pharmacist's task is seen as limited















Preliminary conclusions

- Greater awareness among healthcare professionals about medication management and about patients' preferences is needed
- Definition of roles and responsibilities of professionals is necessary to reduce inappropriate medication use
- An end-of-life medication management guideline should be participant-based

