

Prescribing Optimisation Method

An effective educational tool for medical students to master polypharmacy

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EUGMS 2013



How to optimise polypharmacy



Prescribing Optimisation Method

Judgemental (implicit) method

1. Actual use
2. Side effects
3. Undertreatment
4. Overtreatment
5. Interactions
6. Dosage (kidney function)

Includes explicit methods: START/STOPP



Is the POM an effective tool for medical students to master polypharmacy?


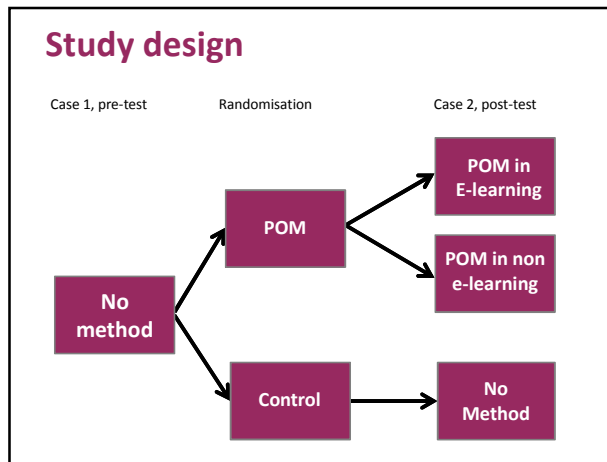
With or without e-learning?

How is the satisfaction on the method and the e-learning environment



Randomised controlled trial

103 final year medical students
 2 faculties of medicine
 Sources as in clinical practice e.g. internet
 Cases based on real life cases

Medication list students vs expert panel

Each drug: right or potentially harmful decision



Baseline results

control vs intervention

Variable	Unit	Control (n=53)	Intervention (n=50)	p-value
Age	median (range)	25 (23-32)	25 (23-40)	0.38
Gender	% female	75	58	0.06
Location	Utrecht n	27	24	0.77
	Amsterdam n	26	26	
No. of weeks before graduation	median (range)	12 (6-42)	12 (6-40)	0.98
Relevant pre-training	Non/non-relevant	44	41	0.89
	Relevant	9	9	
Score pre-test	Right decision n (SD)	5.8 (1.7)	5.2 (1.5)	0.11
	Harmful decision n (SD)	3.4 (1.5)	3.4 (1.0)	0.99

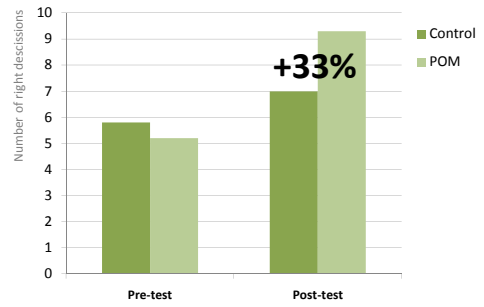
Baseline results

e-learning vs non-e-learning

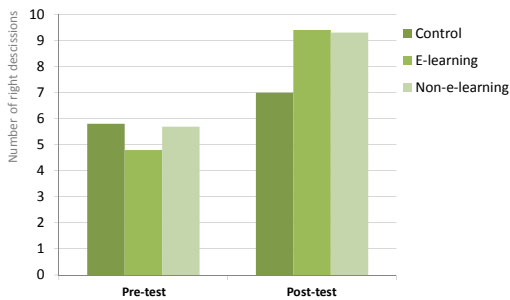
Variable*	Unit	E-learning (Faculty 1)	Non-e-learning (Faculty 2)	p-value
Age	median (range)	26 (23-38)	24 (23-40)	0.00
Score pre-test	Right decision n (SD)	5.1 (1.6)	5.9 (1.6)	0.01
	Harmful decision n (SD)	3.6 (1.2)	3.2 (1.2)	0.11

*Only differences

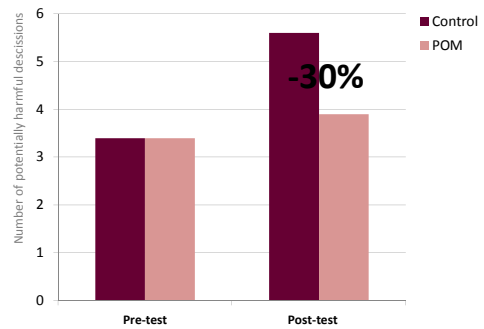
Main Results

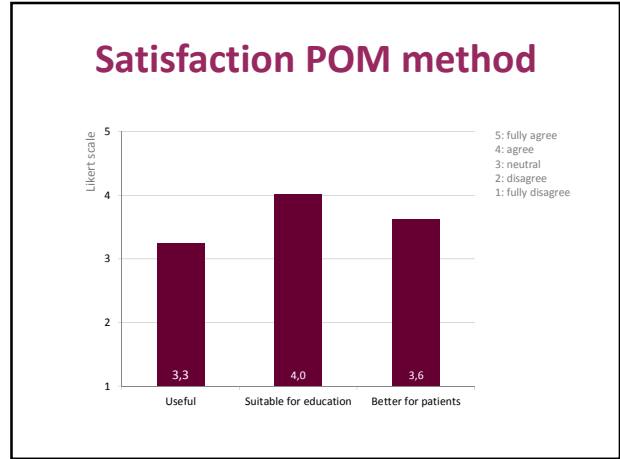
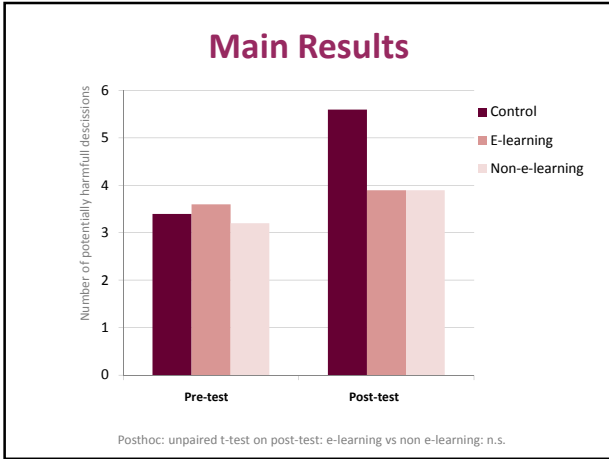


Main Results



Main Results





Prescribing Optimisation Method

A well appreciated and effective educational tool for medical students to master polypharmacy

