

Co-prescribing for patients on ART in the community: a quality improvement project

Dr Emma C Carter

Central Manchester University Hospitals NHS Foundation Trust



Introduction

Despite continuing advancements in Antiretroviral therapy (ART), there continue to be significant interactions with commonly prescribed medications. This poses a risk for General Practitioners when prescribing for patients with HIV as they may not be aware which ART the patient is taking, or of the possible drug interactions.

GMC guidance advises GPs to review and quickly incorporate changes to patient's hospital prescribed medicine into their record. This would require timely communication from secondary care, which may be problematic when considering issues of confidentiality surrounding HIV care

NICE advise the use of the following regarding prescribing for patients with HIV: www.hiv-druginteractions.org; BNF; specialist advice if any doubt.

Aims

- To evaluate common practice amongst GPs when prescribing for HIV patients on ART.
- To assess whether up to date HIV clinic letters were uploaded onto GP e-records.
- To assess whether patients on antiretroviral therapy (ART) had these medications incorporated into their GP e-record (EMIS).
- To assess the effect of an educational intervention on recording of ART in GP e-record

Method

Setting: Large urban GP practice

• A survey was distributed to GPs to assess their prescribing practice for patients taking ART, questions asked were:

- "How would you check for drug interactions when prescribing for patients with HIV?"
- "Are you aware of the resource www.hiv-interactions.org?"
- "Do you know how to add Hospital Administered Medications to e-record?"
- "Do you think it would be helpful to add Hospital Administered Medications to e-record?"

• The following search criteria were used to search GP e-record for patients with HIV registered at the practice: HIV diagnosis; HIV antibody positive

- Records for all patients registered as HIV positive were manually checked.
 - The latest HIV clinic letters were scrutinised for current ART.
 - Each patient's medication list was checked to see if ART had been added to the Hospital Administered Medication Section.

Intervention

- Brief one-off educational intervention with GPs at the practice:
- Demonstration of use of www.hiv-druginteractions.org
- Demonstration of how to add hospital administered medications to GP e-record.

Initial findings

10/15 GP survey responses were received.

- To check for ART interactions:
 - 3 would use www.hiv-druginteractions.org;
 - 2 would ask the patient to check with their HIV specialist
 - 1 would use the BNF
- 5/10 GPs knew how to add hospital administered medications to EMIS

15 HIV positive patients were identified as registered with the practice.

- 14/15 patients had an up-to-date HIV clinic letter from last 12 months.
- All patients were taking ART.
- 4/15 (27%) had ART recorded under Hospital Administered Medication on EMIS.

GP Survey responses

Would it be useful to incorporate ART into GP e-record?

"Helps flag up interaction"

"Easily missed if not added"

Reasons given for not incorporating ART in e-record...

"Patients with HIV often well-informed and will tell you (their ART)"

"Don't always get written correspondence from sexual health clinics"

"Complicated medications"

"Does EMIS system have knowledge to flag up relevant issues?"

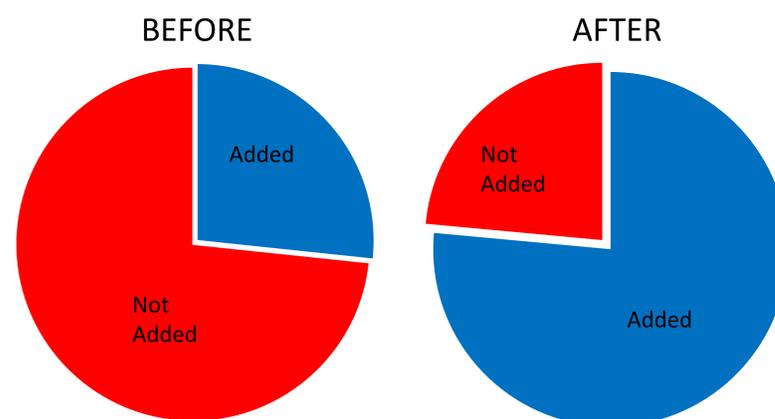


Fig.1 Proportion patients with up to date ART incorporated into GP e-record before and 3 months after educational intervention

Results post educational intervention

- All GPs thought that www.hiv-druginteractions.org appeared a comprehensive and user-friendly resource

20 HIV positive patients now registered at practice:

- 18/20 had up-to-date clinic letters
- 1 on clinical trial (ART unknown)
- 13/17 had ART incorporated into GP e-record

Discussion

- This project demonstrates a lack of local awareness of the available tools for checking drug interactions with ART, and only 3/10 GPs asked would use the website www.hiv-druginteractions.org as recommended by NICE.
- Once shown this resource our GPs thought it appeared a user-friendly, reliable way to check interactions
- A one-off educational intervention improved incorporation of ART into GP e-record by 49.7%

Recommendations

- Awareness should be raised in primary care of the resource www.hiv-druginteractions.org as recommended by NICE for safe prescribing in primary care for patients taking ART.
- Primary care physicians should incorporate ART into the GP e-record as recommended by GMC.
- Training on how to do add hospital administered medications, such as ART, should be part of IT induction in GP practices, as a simple one-off demonstration proved an effective intervention.

References

- 1) Good practice in prescribing and managing medicines and devices; General Medical Council; published January 2013; accessed via URL http://www.gmc-uk.org/guidance/ethical_guidance/14316.asp on 15/09/2017.
- 2) HIV infection and AIDS; National Institute of Clinical Excellence Clinical Knowledge Summaries; revised September 2015; accessed via URL <https://cks.nice.org.uk/hiv-infection-and-aids#!scenario:2> on 15/09/2017
- 3) HIV drug Interaction website; University of Liverpool; URL <http://www.hiv-druginteractions.org/>