ANALYSIS OF ADVERSE EVENTS RELATED TO THE ADMINISTRATION OF MEDICATION THROUGH ENTERAL DEVICES IN PATIENTS AT HOME CARE

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Introduction: Administration of enteral medications is a common practice in Home Care, and preventing related complications is a challenge. The enteral route, through oral ingestion or enteral device (ED), is preferable to the intravenous route due to the greater comfort, lower cost and lower risk of infections. However, EDs require attention as to the risks that involve obstruction of the pathway (probe extension) and balloon rupture, risks that can cause the displacement of this ED. Attention to these risks guarantees the effectiveness of oral medications administered by this via, and maintenance of the security of the assistance.

Objective: Identify the association between medication and adverse events related to obstruction and rupture of ED and implement actions to improve patient care.

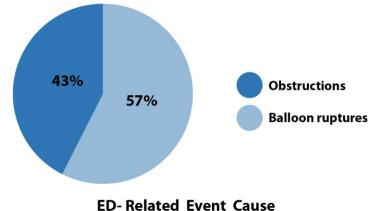
Methods: Retrospective cohort. Analysis of prescription was performed by the clinical pharmacist through consultation of medication instructions according to the manufacturer and information from the Drug Information Handbook.



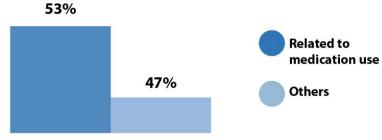
Results: Between August/19 and July/20, 214 patients had ED events, 123 obstructions (57.5%), 91 balloon ruptures (42.5%). The highest prevalence of these cases occurs in elderly patients (92.5%). The analysis of the medical prescriptions of these patients showed that in 114 cases (53.3%) the adverse events are related to the use of medications:

- → 75 patients (65.8%) used drugs not recommended for use in ED;
- → 29 patients (25.4%) presented inadequate medication dilution;
- → 10 patients (8.8%) used drugs with acid characteristics.

ED-Related Events



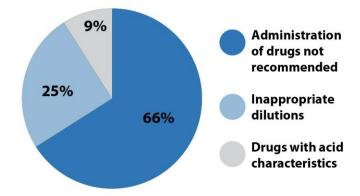
ED-Related Event Cause



Medications involved in the events

MEDICATIONS	INCIDENCE
Pantoprazole	23,60%
Bromopride	13,10%
Domperidone	12,30%
Lactulose	10,50%
Lactobacillus	8,70%
Acetylcysteine	7%
Macrogol	6,10%
Omeprazole	5,20%

Events related to medication administration



Conclusion: Medications are often correlated with adverse events involving ED. Elaboration of institutional protocol for preparation and administration of medications by ED, standardization of crushing, dissolving, washing the device and formalization of drugs not recommended by this route are crucial to reduce adverse events and improve quality of care.



