

***[P-515D] Underutilization of cardiac medication therapy in diabetic elderly outpatients at a Veterans Affairs medical center***

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***Methods for determining medication appropriateness evaluate whether a prescribed medication regimen is appropriate. These methods do not consider whether pharmacologic therapy is absent or underutilized. The objectives were to establish the prevalence of cardiac medication therapy underutilization in elderly diabetic outpatients and examine the effect of clinical pharmacists. Sixty diabetic patients >74 years of age who were enrolled in Primary Care or Geriatrics clinics for at least one year and seen between July 1999 through December 1999 were randomly chosen for inclusion. A clinical pharmacist and physician independently conducted a retrospective abstracted chart review of patient information. The number of cardiac medications that were indicated but absent from the medication regimen was determined. The effect of clinical pharmacists in the geriatrics clinic was determined by tabulating the number of recommendations made to add cardiac medications during the study period. The average age was 79.4 years. Per patient, the average number of medications used was 8.3, number of disease states was 7, number of cardiac conditions evaluated was 2.7, and number of cardiac conditions with underutilization was 1. Thirty-seven (62%) of patients had at least one cardiac condition with underutilization of medication. For the 30 patients from the geriatrics clinic, clinical pharmacists made 9 recommendations for the addition of cardiac medications. Five recommendations were accepted. Cardiac medications were underutilized in diabetic elderly outpatients and clinical pharmacists may positively influence underutilization. Larger studies should be conducted in nonveteran populations to determine the prevalence of the underutilization of medications.***