Bulletin Pharmacy Hospital Segamat

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BIL 03/2015

BULLETIN HOSPITAL SEGAMAT BIL 03/2015

INTRODUCTION

As more medicines and new brands are being marketed in addition to the thousands already available, many of these medication names may look or sound alike. Confusing medication names and similar product packaging may lead to potentially harmful medication errors. It is one of the most common causes of medication error and is of concern worldwide.[1]

In addition, when patients take multiple prescription medications and/or receive care from different health care providers, medication history information may be less reliable and more difficult to verify.[1]

Common risk factors associated with **LASA medications** includes:

- Illegible handwriting
- Incomplete knowledge of drug names
- Newly available products
- Similar packaging or labelling
- Similar strengths, dosage forms, frequency of administration
- Similar clinical use

Medications that are visually similar in physical appearance or packaging and names of medications that have spelling similarities and/or similar phonetics.

"Tall man" lettering

A method for differentiating the unique letter characters of similar drug names known to have been confused with one another. Highlighting a unique portion of a drug name with upper case letters can draw attention to the dissimilarities between look-alike drug names, making them less prone to mix-up. In US, several studies have shown that the utilization of tall man lettering is effective in reducing errors caused by look-alike names.[1-2]

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Strategies to avoid errors with Look Alike Sound Alike Medications[1]

1. Procurement

- Minimize the availability of multiple medicines strengths.
- Avoid purchase of medicines with similar packaging and appearance

2. Storage

- Use ***Tall Man lettering*** to emphasize differences in medications with sound-alike names
- Use additional warning labels for look-alike medicines.

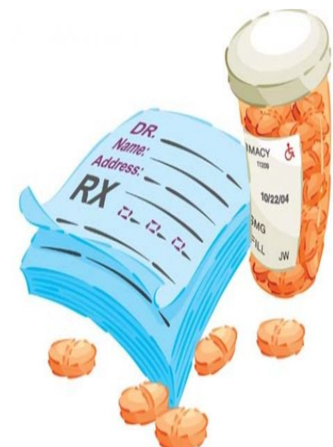
Tall-man Lettering of Sound Alike Medications[3]

amLODIPine	aMILoride			
amLODIPine	FELOdipine	NIFEdipine		
amPIcillin	amOXIcillin	CLOXAcillin	PENIcillin V	
ATEnolol	BISOprolol	LABEtalol	METOprolol	PROPRAnolol
ATORvastatin	PRAvastatin	SIMvastatin		
ARIPIprazole	ESOMEprazole	OMEprazole	PANTOprazole	
AZITHROmycin	CLINDAmycin	ERYTHROmycin		
CAPTOpril	ENALApril	PERINDOpril		
cefUROXime	cefoTAXime	cefTAZidime	cefTRIAXone	cefIPime
cefoPERAZone				
CHLOROquine	PRIMAquine			
clomiPHENE	clomiPRAMINE			
clonazePAM	DIazepam	LORazepam		
CLOzapine	OLANzapine	QUEtiapine		
DOBUTamine	DOPamine			
DULoxetine	FLUoxetine			
ePHEDrine	EPINEPHrine			
FLUconazole	ITRAconazole	KETOconazole		
fluPENTixol	fluPHENAZine	fluvoxaMINE		
hydroxychloroQUINE		hydroxychloroTHIAZIDE		
lamiVUDine	lamoTRIgine			
LAMIvudine	STAvudine	ZIDOvudine		
LOsartan	TELMIsartan	VALsartan		

* FDA and ISMP Lists of Look-Alike Drugs Names with Recommended Tall Man Letters

3.Prescribing

- Write clearly whether on an inpatient order or on a prescription.
- Prescription should clearly specify name of medication, dosage form, dose, complete direction for use and diagnosis or medication's indication for use.
- Communicate clearly.



4. **Dispensing/Supply**

- Identify medicines based on its name and strength and not by its appearance or location.
- Check the appropriateness of dose for the medicines dispensed.
- READ medication labels carefully at all dispensing stages and perform triangle check.
- Double checking should be conducted.

5.Administration

- Read the medication labels carefully during administration and perform triangle check
- Emphasize the need of read label rather than relying on visual recognition
- Make read back clarification of verbal order as a requirement

Triangle check

To check actual medicines against the medicines' labels and against the prescription.

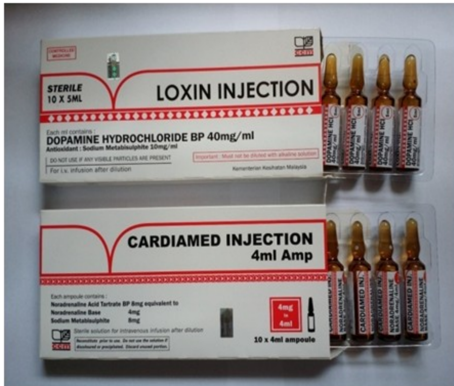
6. **Monitoring**

- All facilities need to identify medications that sound alike and look alike medication in its organization.
- Encourage feedback mechanism to inform LASA medication
- Update LASA medication list once a year

7. **Information**

- All relevant personnel have access to the LASA list
- Staff will get informed/updated on new mediactions that listed as LASA

LIST OF LOOK ALIKE SOUND ALIKE MEDICATIONS BY PHARMACY DEPARTMENT, HOSPITAL SEGAMAT



Dopamine VS Noradrenaline

Frusemide VS Ranitidine

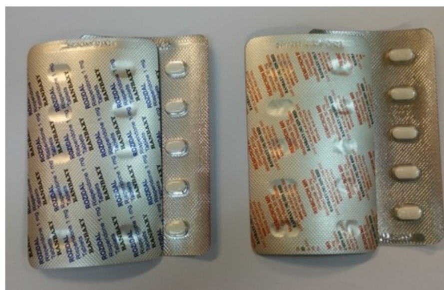
Phytomenadione VS Haloperidol

Cefuroxime VS Cefoperazone

Ceftazidime VS Ceftriaxone

Alprazolam 0.5mg and Lorazepam 1mg

Cefotaxime 500mg VS Cefotaxime 1000mg



Risperidone 1mg vs Gliclazide MR 30mg

Ampicillin &Sulbactam 1.5g VS Co-Amoxiclav 1.2g

FDA Drug Safety Communication

FDA strengthens warning that non-aspirin nonsteroidal anti-inflammatory drugs (NSAIDs) can cause heart attacks or strokes[4]

ISSUE: **FDA** is strengthening an existing label warning that non-aspirin nonsteroidal anti-inflammatory drugs (NSAIDs) increase the chance of a heart attack or stroke. Based on ***FDAs comprehensive review*** of new safety information, FDA is requiring updates to the drug labels of all prescription NSAIDs. As is the case with current prescription NSAID labels, the Drug Facts labels of over-the-counter (OTC) non-aspirin NSAIDs already contain information on heart attack and stroke risk. FDA will also request updates to the OTC non-aspirin NSAID Drug Facts labels.

BACKGROUND: The risk of heart attack and stroke with NSAIDs, either of which can lead to death, was first described in 2005 in the Boxed Warning and Warnings and Precautions sections of the prescription drug labels. Since then, FDA reviewed a variety of new safety information on prescription and OTC NSAIDs, including observational studies, a large combined analysis of clinical trials, and other scientific publications. These studies were also discussed at a joint meeting of the Arthritis Advisory Committee and Drug Safety and Risk Management Advisory Committee held on February 10-11, 2014.

RECOMMENDATION: Patients and health care professionals should remain alert for heart-related side effects the entire time that NSAIDs are being taken. Patients taking NSAIDs should seek medical attention immediately if they experience symptoms such as chest pain, shortness of breath or trouble breathing, weakness in one part or side of their body, or slurred speech.

Prescription NSAID labels will be revised to reflect the following information:

- The risk of heart attack or stroke can occur as early as the first weeks of using an NSAID. The risk may increase with longer use of the NSAID.
- The risk appears greater at higher doses.
- It was previously thought that all NSAIDs may have a similar risk. Newer information makes it less clear that the risk for heart attack or stroke is similar for all NSAIDs.

PHARMACY ACTIVITIES-KENALI UBAT ANDA(KUA) EXHIBITION

KUA HOSPOTAL SEGAMAT

Read more on:

1. Pharmaceutical services division. Guideline on handling Look Alike, Sound Alike Medications. 2012. Ministry of Health Malaysia.
2. Preventable Medication Errors – Look-alike/Sound-alike Drug Names .ISMP Canada.2014
3. ISMP List's of Confused drug name.2015.Available at: https://www.ismp.org/tools/confuseddrugnames.pdf
4. FDA Drug Safety Communication: FDA strengthens warning that non-aspirin nonsteroidal anti-inflammatory drugs (NSAIDs) can cause heart attacks or strokes. Available:http://www.fda.gov/Drugs/DrugSafety/ucm451800.htm

Adverse Drug Reaction Report Hospital Segamat

ADR REPORTED FROM JULY TO NOVEMBER

No	DATE	MEDICATIONS	ADR
1	8.7.2015	T. Erythromycin ethyl succinate	Peri-orbital swelling and shortness of breath
2	8.7.2015	T. Bactrim	Maculo-papular rash over abdominal area of skin
3	15.7.2015	T. Allopurinol	Maculo-papular rash over anterior body and bilateral leg
4	10.9.2015	Duphaston	Generalised pruritus
5	4.11.2015	Freeze Dried Glutamate BCG Vaccine	lymphadenitis
6	25.11.2015	Sy. Augmentin	Rashes all over body