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How routine is follow-up monitoring of atrial fibrillation patients prescribed direct oral anticoagulants? A Case study of Irish GPs using a count model

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Background: Direct Oral Anticoagulants (DOACs) are widely marketed as medicines that don't require routine laboratory monitoring. However, owing to their complex pharmacological properties and side effects prescribing and monitoring guidelines have emerged. These advocate monitoring for renal and hepatic impairment; bleeding episodes; liver function; co-medication; circulation and occurrence of side effects. Though advocated, follow-up is currently not routine and its implementation creates an externality for general practitioners (GP)s managing Atrial Fibrillation (AF) patients in the community.

Objectives: This study investigates the frequency, the type of follow-up, and the factors that influence follow-up amongst Irish GPs, who prescribe DOACs to patients with AF, to prevent strokes.

Methods: The frequency and type of follow-up care is estimated and a count model is applied to determine the GP and practice characteristics that influence the implementation of follow-up.

Results: The most frequently observed guidelines are those pertaining to renal function (82%), bleeding episodes (71%), liver function (69%), circulation (54%) and side-effects (55%). The regression analysis revealed that female GPs (P=0.05) and GPs who observe all seven guidelines (P=0.06), practice more frequent follow-up while those in training practices (P=0.09) provide less frequent follow-up.

Conclusions: Results show that there is a lack of adherence to prescribing guidelines with only 24% adhering to all seven guidelines and infrequent patient follow-up. Results indicate that existing education and decision support tools are not being incorporated into routine workflows for GPs managing AF patients prescribed DOACs.

Conclusions: Metformin succeeded to limit weight gain the obese with pregnancy.

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