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The Role of the Clinical Pharmacist in Identifying Drug-Drug Interactions (DDIs) in a Hospital

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ABSTRACT

Drug interactions, one of the primary subcategories of medication errors, can also result in a variety of unfavorable adverse effects. According to their severity, DDIs can be divided into Major, Moderate, Minor DDIs. Patients who are hospitalized for a longer period of time. Various severe diseases, long-term treatment regimens, polypharmacy, and frequent therapy modifications are also likely to get DDIs. **Objective:** To identify and categorize the drug-drug interactions according to their severity and to develop strategies to prevent drug-drug interactions. **Methodology:** A Prospective observational study was conducted over a period of 12 months in a hospital. Patients admitted to the Depts. of Ophthalmology, ENT, Pulmonology, and General medicine, were selected randomly by considering the study criteria. The data collected were analyzed for identifying DDIs such as Major, Moderate, Minor DDIs. **Results:** A total of 1200 prescriptions were analyzed during the study period, of which 432 (36%) prescriptions showed 600 DDIs. Out of 600 DDIs, 210 (35%) were identified in General Medicine Department, 115 (19.16%) from ENT Department, 190 (31.66%) from Pulmonology department, 85 (14.16%) from Ophthalmology Department. Distribution of DDIs according to severity in study showed that among 600 DDIs, 284 (47.4%) identified as minor interactions followed by Moderate interactions 262 (43.6) and 54 (9%) Major interactions were identified. **Conclusion:** Majority of the DDIs identified in this study were minor and moderate in severity that did not cause any adverse effects. The study suggests that involving clinical pharmacist services

in patient care can considerably help to identify, resolve, and prevent DDIs, hence improving patient therapeutic results.

Key words: Drug-Drug Interaction, Medication errors, Clinical pharmacist

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