



## Welcome to Telligen's Project ECHO® Series: Anticoagulants in Long-Term Care

### **What Prescribers and Pharmacists Should Know About Anticoagulant Best Practices**

We will get started momentarily

- Using chat, enter your organization and state
- Please complete the poll

# A Project ECHO® Series: Anticoagulant Use in Long-Term Care

**What Prescribers and Pharmacists Should Know About Anticoagulant Best Practices**

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## Project ECHO® Disclaimer

Project ECHO® collects registration, participation, questions/answers, chat comments and poll responses for some ECHO programs. Your individual data will be kept confidential. These data may be used for reports, maps, communications, surveys, quality assurance, evaluation, research and to inform new initiatives.

## Before We Begin

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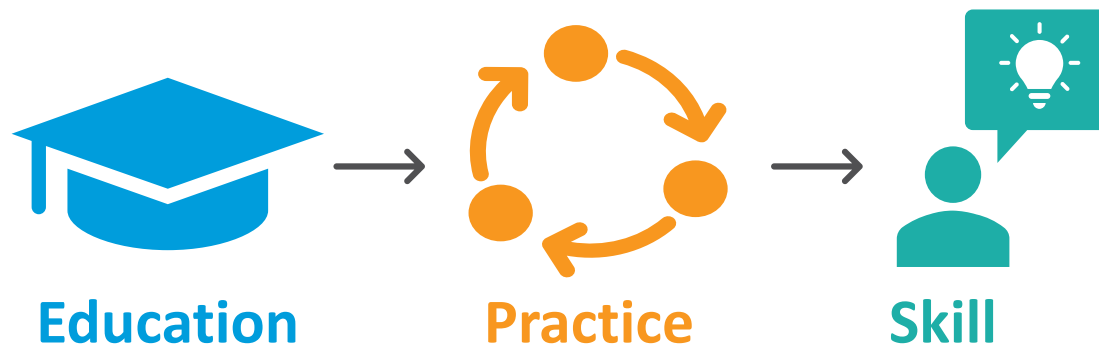
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NEW! Telligen's nursing home listserv – sign up [HERE](#)

# Begin With the End in Mind

## During the presentation, visualize and plan how you will use the information:

- What impactful actions can you take as a result of the information shared today?
- How are you able to increase collaboration within your network to ensure a true change in patient safety?
- Based on what you heard today, what activities do you currently have underway that can leverage immediate action over the next week, 30, 60 and 90 days?



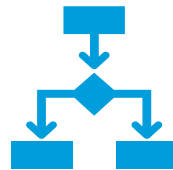
# Age-Friendly Health System

- What is an [Age-Friendly Health System](#) (AFHS)?
- Age-Friendly Health Systems aim to:
  - Follow an essential set of evidence-based practices
  - Cause no harm
  - Align with what matters to the older adult and their caregivers

## 4Ms: What Matters, **Medication**, Mentation and Mobility



Monitoring system



Necessity decision



Does not interfere with What Matters,  
Mentation and Mobility

# Objectives

- Compare the incidence rates of adverse drug events in the Medicare fee-for-service (FFS) population
- Describe the financial and human impact of anticoagulant adverse drug events (ADEs)
- Estimate the situational risk of an anticoagulant ADE based on relevant variables



# Anticoagulants and Bleeding Risks

- Bleeding events are the major adverse effect of all anticoagulants
- Incidence rates
  - Warfarin:  $\leq 5\%$
  - Rivaroxaban:  $\leq 4\%$
  - Apixaban:  $\leq 2\%$
  - Edoxaban: 1-13%
  - Dabigatran:  $\leq 6\%$





# Anticoagulant Risk Versus Other High-Risk Medications

- Digmann et al., examined the relative rates of adverse drug events (ADEs) related to three high-risk drug classes
- Prevalence rates per 1,000 fee-for-service (FFS) beneficiaries (20.7% of total FFS population)
  - Antidiabetics: 20.72%
  - Opioids: 42.11%
  - Anticoagulants: 68.52%
  - Overall: 46.28%

# Scope of Anticoagulant Adverse Drug Events (ADEs)

- 2023 study estimated national rates based on 60 hospital sample
  - ~230,000 ED visits due to anticoagulant-related bleeding in 2016
  - Increased to ~301,000 in 2020
  - Annual average of ~121,000 (47.8%) resulted in hospitalization
- Rates of events are lower with direct oral anticoagulants (DOACs) relative to warfarin
  - DOAC related events: 5.9 per 100 patients; warfarin-related events: 13 per 100 patients
- Age greatly increases risk of ADE
  - Rate of events per 100 patients is 13.1 for >80 years and 4 for patients <45 years

# Anticoagulant Adverse Drug Events (ADEs) Types and Impact

- 463 Anticoagulant ADEs over five years at Brigham and Women's Hospital
  - Medication errors: 226 (48.8%)
  - Adverse drug reactions (side effects): 141 (30.5%)
  - Both medication errors and ADE: 96 (20.7%)
- Impact per ADE
  - \$33,189 in nursing costs
  - \$7,451 in pharmacy costs
  - 11% of patients deceased within 30 days of ADE

# Anticoagulant Adverse Drug Events (ADEs) and Transitions of Care

- Large Canadian study (n=123,139) of patients  $\geq 66$  years old
- Rates of major ADE per 100 person – 30 days after hospital discharge
  - Hemorrhage: 25.8%
  - Thromboembolic event: 19.3%
- Rates of major ADE per 100 person – greater than 30 days but less than 1 year after hospital discharge
  - Hemorrhage: 15.7%
  - Thromboembolic events: 6.9%

# Impact of Adverse Drug Events (ADEs) in Long-Term Care (LTC)

- Rehospitalization and emergency department visit rates<sup>1</sup>
- Residents/patients: falls, fractures<sup>2</sup>, suffering, care service transitioning, quality of life and death
- LTC staff: shame, guilt and legal liability
- Regulatory citations
  - Physician Services [§483.30\(a\)](#)
  - Pharmacy Services [§483.45](#)
  - QAPI Plan to Address High Risk Areas [§483.75\(e\)\(1\)](#)
- Potential fear among nursing homes staff to approach prescribers when a medication prescribed, or other plan of care decision doesn't look right

1. [Adverse Events in Skilled Nursing Facilities: National Incidence Among Medicare Beneficiaries \(OEI-06-11-00370; 02/14\) \(hhs.gov\)](#)

2. <https://jamanetwork.com/journals/jamainternalmedicine/fullarticle/2755293>

# Collaborate with Long-Term Care (LTC) Providers

Invite LTC providers in your network to attend the following ECHO<sup>®</sup> Sessions:

- Project ECHO<sup>®</sup> Series: Long-Term Care Medication Management of Blood Thinners
  - Four weekly sessions from August 2-23
    - Session 1: Introduction to adverse drug events related to anticoagulants
    - Session 2: Anticoagulant adverse drug event recognition and Safety Review Tool
    - Session 3: Communication with residents and representatives
    - Session 4: Communication with prescribers, pharmacists and others outside the facility

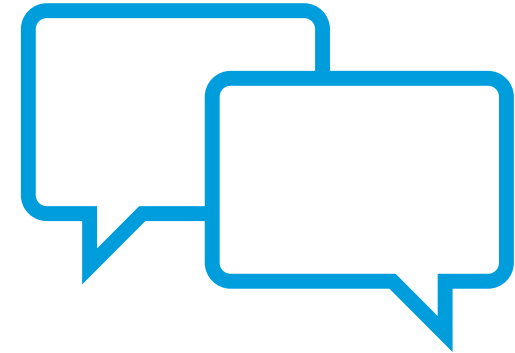
Learn more and [register here!](#)

Share [recorded sessions](#)

Goal: Collaborating efforts to improve the management of medications to have the greatest impact for positive outcomes

# Anticoagulant Adverse Drug Events (ADEs) Epidemiology Discussion

- Was the data discussed here intuitive?
  - Prominence of anticoagulants in long-term care ADEs?
  - Effect of age on anticoagulants ADEs?
  - Financial and human impact of anticoagulant ADEs?
- Transitions of care are associated with heightened risk of anticoagulant ADEs. What are strategies that can be utilized to reduce the risk?



## Next Steps – Lead into Action

- Collaborate with long-term care providers
- Realize the impact of anticoagulants on health of long-term care residents
- Share Telligen resources, including concurrent ECHO series, with facilities that you serve





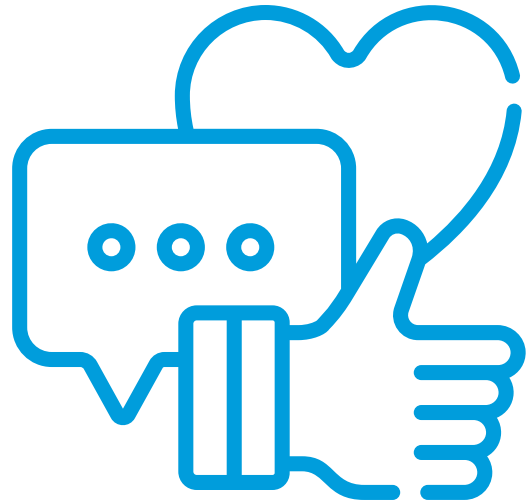
# High-Risk Medication ECHO Series Resources

Seven sessions to share key information and strategies focusing on medication management, resident safety and quality of care

- Review each session's summary on the website and prioritize improvement needs
- Watch each session recording
- Use the tools and resources
- Implement the call-to-action under each session title



## How Did We Do? Let Us Know:



Please fill out the poll before logging off

# Project ECHO® Series on Anticoagulant Best Practices for Prescribers and Pharmacists

Lunch with us for 30 minutes on the following Thursdays at 12:30 p.m. CST

ECHO® Session Dates and Topics:

- Session 2: August 10, 2023 – Warfarin prescribing practices
- Session 3: August 17, 2023 – Uses for Direct Oral Anticoagulants (DOACs)



**Learn more and register here:**

[https://telligen.zoom.us/meeting/register/tZ0odu2hpjMoGtchn8\\_rv\\_O3olhyUt6UhRx#/registration](https://telligen.zoom.us/meeting/register/tZ0odu2hpjMoGtchn8_rv_O3olhyUt6UhRx#/registration)

Access prior session presentations and recordings [here!](#)

# Contact Us



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