

MINIMIZING HEALTHCARE ERRORS : A PROBLEM - BASED APPROACH

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Unfortunately, health care errors are a frequent occurrence in medicine and thus it is important to take action to minimize their occurrence. This paper concentrates on minimizing health care errors due to medicines and provides an overview of the scale of the problems and reviews the causes and solutions.

It has been estimated in developed nations that adverse drug events occur often, are a frequent cause of morbidity and death, and cost the health care system millions of dollars per year. There is a paucity of data from developing countries. The main causes of adverse drug events include medication errors, adverse drug reactions, poor drug quality and inappropriate use of medicines.

The paper focuses on how to investigate an adverse drug event, identify the exact nature of the problem and its cause and take corrective action, which should include action to prevent such events from recurring. The paper also describes the common types of medication error, adverse drug reactions, drug quality and inappropriate use and how these particular problems may be tackled both at the local and national levels.

Finally the role of the Drug and Therapeutic Committee and its importance in implementing quality improvement cycles are discussed in order to minimize health care errors from medicines. It is concluded that active measures are required to encourage staff to report all problems, which should be investigated in a non-confrontational way and followed by action to correct both the immediate problems and to prevent future similar occurrences. In addition regular prescription audit should be done to identify prescribing problems in advance and to take corrective action so as to minimize health care errors due to medicines.

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