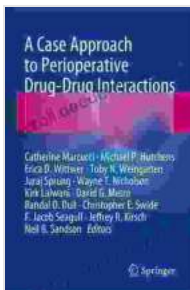


Case Approach to Perioperative Drug-Drug Interactions: A Comprehensive Guide for Healthcare Professionals

Drug-drug interactions (DDIs) are a major concern in healthcare, particularly during the perioperative period when patients are often exposed to multiple medications. Perioperative DDIs can lead to serious adverse events, including increased toxicity, decreased efficacy, and altered drug metabolism. Therefore, it is essential for healthcare professionals to have a thorough understanding of the case approach to perioperative DDIs.



A Case Approach to Perioperative Drug-Drug Interactions by Choi-Keung Ng

★★★★☆ 4.5 out of 5

Language	: English
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Text-to-Speech	: Enabled
Screen Reader	: Supported
Enhanced typesetting	: Enabled
Print length	: 1316 pages
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Key Concepts

The case approach to perioperative DDIs involves a systematic evaluation of the patient's medication regimen, identification of potential DDIs, and development of strategies to manage or avoid these interactions. Key concepts include:

- **Comprehensive medication history:** This includes all medications the patient is taking, including prescription drugs, over-the-counter medications, herbal supplements, and vitamins.
- **Drug interaction screening:** This involves using software or databases to identify potential DDIs based on the patient's medication regimen.
- **Assessment of risk:** The risk of a DDI is based on the severity of the interaction, the likelihood of occurrence, and the patient's individual factors (e.g., age, renal function, liver function).
- **Management strategies:** These include dose adjustments, medication changes, and monitoring for adverse effects.

Assessment Techniques

There are several techniques that can be used to assess perioperative DDIs, including:

- **Manual review:** This involves manually checking each medication the patient is taking against a list of known DDIs.
- **Computerized screening:** This uses software or databases to automatically identify potential DDIs.
- **Pharmacist consultation:** A pharmacist can provide expert advice on DDIs and recommend management strategies.

Management Strategies

The management of perioperative DDIs depends on the severity of the interaction and the patient's individual factors. Common strategies include:

- **Dose adjustment:** This involves adjusting the dose of one or more medications to minimize the risk of an interaction.
- **Medication change:** This involves switching to a different medication that does not interact with the other medications the patient is taking.
- **Monitoring:** This involves closely monitoring the patient for any signs of an adverse drug event.

Case Studies

The following case studies illustrate the application of the case approach to perioperative DDIs:

Case Study 1

A 65-year-old patient with a history of coronary artery disease is scheduled for a cardiac catheterization. The patient is taking aspirin, clopidogrel, and warfarin.

Assessment: A computerized screening reveals a potential DDI between aspirin and clopidogrel. Aspirin can inhibit the platelet-inhibiting effects of clopidogrel.

Management: The dose of aspirin is reduced to 81 mg daily while the patient is taking clopidogrel.

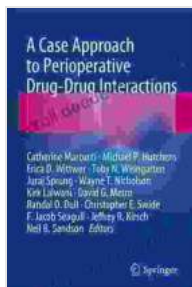
Case Study 2

A 45-year-old patient with a history of asthma is scheduled for a laparoscopic cholecystectomy. The patient is taking albuterol inhaler, salmeterol inhaler, and montelukast.

Assessment: A manual review reveals a potential DDI between albuterol and salmeterol. Both medications are beta-agonists and can increase the risk of tachycardia and arrhythmias.

Management: The patient is switched to a different beta-agonist, formoterol, which has a lower risk of interactions with salmeterol.

The case approach to perioperative drug-drug interactions is essential for healthcare professionals to ensure patient safety during the perioperative period. By understanding the key concepts, assessment techniques, and management strategies involved in this approach, healthcare professionals can minimize the risk of adverse drug events and optimize patient outcomes.



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