



# We "PIC'D" our Battle: Pharmacist Intervention on C.Difficile

## CSHP 2015 Success Story

### CSHP 2015 GOAL :

Increase the extent to which hospital and related healthcare setting pharmacists actively apply evidence-based methods to the improvement of medication therapy.

**Objective 3.1** In 100% of hospitals and related health settings, pharmacists will be actively involved in providing care to individual patients that is based on evidence - such as the use of quality drug information resources, published clinical studies or guidelines and expert consensus advice.

**Objective 3.2:** In 100% of hospitals and related healthcare settings, pharmacists will be actively involved in the development and implementation of evidence-based drug therapy protocols and/or order sets.

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## Pharmacist Notification and Treatment Intervention Benefits in *Clostridium Difficile* Infection (CDI)

### Background:

A multidisciplinary review process of nosocomial CDI revealed numerous opportunities for medication related improvements. As a result of the review, new strategies for early identification, notification, and initiation of targeted drug therapy were implemented. Pharmacists were consulted for clinical direction and leadership on ensuring the appropriate treatment and addressing the medication related modifiable risk factors.

### Objectives

Pharmacists directed the Medication Management Plan for C. difficile.

The goals were:

- ⇒ To ensure patients are appropriately stratified in terms of severity
- ⇒ To ensure initiation of timely and appropriate evidence based drug therapy
- ⇒ To address medication related modifiable risk factors
- ⇒ To reduce the incidence of C. difficile

### Action:

A novel process was developed whereby the Microbiology Lab directly notified all pharmacists of new C. difficile cases. The most responsible pharmacist ensured prompt, appropriate treatment according to severity stratification and modifiable risk factor assessment.

Additionally, the Antimicrobial Stewardship Team led the development of an evidence based protocol and preprinted order form. This protocol stratifies patients based on primary or recurrent episode and targets drug therapy based on the severity of disease as well as, ensuring that the medication related risk factors were reassessed upon treatment initiation.



[www.mrsasurvivors.org/c-Difficile](http://www.mrsasurvivors.org/c-Difficile)

## Results and Evaluation

The pharmacist notification process along with the protocol has facilitated appropriate and more timely evidence-based therapy to patients with C. difficile.

According to the pharmacist documentation reports, interventions are required in >90% of patients reviewed and that >90% of pharma-

cists recommendations are accepted. Interventions have included matching disease severity stratification to treatment regimen, reducing time to initial dose, ensuring reassessment of antimicrobials, proton pump inhibitor therapy, laxatives and anti-peristaltics.

In this CSHP 2015 Success Story, pharmacists were not only actively involved with the development and implementation of the evidence based protocol but also are proactively involved in putting evidence into practice. Clinical and economic outcomes will further be evaluated.