







9° Giornata della Ricerca della Svizzera Italiana Venerdì 15 marzo 2019

Modulo per la sottomissione abstract di ricerca di **Dottorato (PhD e MD)***

*I lavori di tesi possono essere sottomessi solo se conclusi, anche se non ancora accettati da un'università, e solo sotto supervisione di docente attivo in Ticino.

Titolo (massimo 15 parole)

Combining prescription monitoring, benchmarking, and educational interventions to reduce benzodiazepine prescriptions among internal medicine inpatients

Autori (cognome e iniziali, es: Grassi L.)

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Testo (massimo **250 parole**, preferibilmente in italiano (accettato anche in inglese), suddiviso in Introduzione, *Metodi, Risultati, Conclusioni* e *Finanziamento*

Objectives: Reducing the inappropriate benzodiazepine (BZD) prescriptions represents a challenge for health care systems worldwide. The 'Choosing Wisely' campaign recommends against the use of BZD in the elderly as the first choice for insomnia, agitation, or delirium. We aimed to determine whether a transparent monitoring-benchmarking and educational interventions could be effective in curbing BZD prescriptions. Methods: Multicenter before and after study in a network of five southern-Switzerland hospitals. An intervention based on a transparent continuous monitoring-benchmarking system, called 'Reporting Wisely', able to collect, analyze, and report data on BZD prescriptions and educational interventions, was implemented. The intervention was limited to the Internal Medicine. Segmented regression analyses of interrupted time-series was performed. Results: Between July 1st2014, and June 30th2017, data of 45,597 hospital admissions, from Internal Medicine and Surgery departments were analyzed. Before the intervention (July 1st2014 to December 31st2015), the mean monthly new BZD prescription rate was 7.2% dropping to 5.5% (24% relative reduction; p < 0.001) in the intervention phase (January 1st2016 to June 30th2017). At the end of the intervention 15% relative increase of BZD de-prescribing was found (p < 0.01). Atypical antipsychotic and other potentially harmful sedative drugs did not increase. In the surgery department, a constant upward trend with a slope of 0.129 new prescriptions per 100 admissions per month (95% CI 0.08–0.17; p < 0.001) was seen. Conclusions: The implementation of a dual intervention has proved useful in curbing new BZD prescriptions and in promoting BZD de-prescribing in the hospital setting. Financing: none

Visto superiore* (prego indicare Nome e Cognome del superiore) *campo obbligatorio

Gabutti Luca



Criteri per sottomissione Abstract: NO Case report NO Abstract senza nessun risultato VISTO da un superiore

Invio Abstract