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临床药师对幽门螺杆菌阳性患者用药干预的随机对照试验

A Randomized Controlled Trail of a Pharmacy Intervention for Helicobacter Pylori Positive Patients 投稿时间: 2012-10-25 最后修改时间: 2012-12-28

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中文摘要:

目的 观察临床药师干预对幽门螺杆菌阳性患者的意义。方法 选取我院就诊的幽门螺杆菌阳性患者,按患者疾病和年龄随机分为对照组和干预组。共纳入219例患者,完成对照组88例,干预组90例。对照组采用四联疗法7 d,医师按平时诊疗交代患者;干预组除以上诊疗外,临床药师对患者用药进行指导,并告知患者填写服药日记卡。2组患者分别于停药后30 d[14]C尿素呼气试验复查幽门螺杆菌根除率,停药后、停药后30 d、半年和1年电话随访。结果 幽门螺杆菌根除率(对照组71.59%vs干预组78.89%)、随访调查2组腹痛、烧心、恶心、呕吐、嗳气等临床症状的复发率均无显著性差异。2组的药品不良反应发生率接近,但正确使用药物(对照组73.86%对比干预组94.44%)和对诊疗的满意度(对照组78.41%对比干预组95.56%)差异有统计学意义。结论 临床药师的干预能提高幽门螺杆菌阳性患者正确用药和对诊疗的满意度。

英文摘要:

OBJECTIVE To observe the importance of clinical pharmacist interventions on Helicobacter pylori positive patients. METHODS Helicobacter pylori positive patients were randomly divided into control or intervention groups according to the disease and age. 219 patients were under study. 88 patients were finished in control and 90 in intervention. Patients in the control group were treated with quadruple chemotherapy for 7 days. The administration accounts were executed by doctors as usual treatment. The intervention group was treated in addition to the above treatment, also the drug education was done by clinical pharmacists and the diary cards were issued. Helicobacter pylori eradication rates of all patients were tested by [14]C urea breath test after the end of stopping all medicines 30 days. And telephone follow-up was done at the end of stopping all medicines, after 30 days, half a year and 1 year. RESULTS There was no significant difference in the 2 groups of Helicobacter pylori eradication rates (control 71.59% vs intervention 78.89%), relapse rates of epigastric pain, heartburn, nausea, vomiting and belching, the incidence of adverse reactions. But there were significant differences in the rates of proper use of medications (control 73.86% vs intervention 94.44%) and satisfaction for the treatments (control 78.41% vs intervention 95.56%). CONCLUSION Clinical pharmacist interventions on Helicobacter pylori positive patients improve their proper use of medications and satisfaction to the treatments.

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