Background The majority of all hospitalised patients use medication at home. On admission, patient’s medication is often ordered or changed to the hospital’s formulary. Therefore, the use of home medication during hospitalisation (HMDH) may prevent unnecessary medication waste, because currently ordered medication is disposed of at discharge. Furthermore, these medication changes have the potential to cause harm. In addition, they oppose the possibility for patients to participate in their pharmaceutical treatment. Therefore, the implementation of HMDH may increase patient satisfaction.

Purpose The aim of this study was to investigate the effect of HMDH on medication waste and patient satisfaction.

Material and methods This multicentre quasi-experimental study was conducted at seven different nursing wards, including both surgical and non-surgical wards. During pre- and post-implementation of HMDH, data were collected for 2 months at a time. Medication waste was measured by identifying all disposed medication for at least 1 month during both periods. The following data were collected: price per unit on November 2017, unique medication identification number and the amount of medication disposed of. Patient satisfaction was measured using a questionnaire about patients’ perceptions and beliefs. The results of the questionnaire were statistically tested by performing a t-test.

Results The total value of disposed medication was €14,954 (SD €2,887) and €10,728 (SD €1,728) per month, during pre- and post-implementation of HMDH, respectively. HMDH led to a reduction of 28.3% in medication waste costs. Extrapolation of these data to the national level may theoretically lead to €15 million savings annually in medication costs. In total, 912 patients completed the questionnaire. Pre-implementation, 69% (n=337) of all patients were positive about HMDH. When HMDH was implemented, this number significantly increased to 83% (n=328; p<0.05).

Conclusion The results of this study show that implementation of HMDH decreases costs associated with medication waste. In addition, the introduction of HMDH increases patient satisfaction.

REFERENCES AND/OR ACKNOWLEDGEMENTS

No conflict of interest.