

Follow up of 167 INRs in elderly patients under anticoagulants: compliance of medical décisions with guidelines for overdosage management

Gerard Nguyen¹, Dominique Le Mout¹, François Sigwald³, Gladys Arbaud², Thérèse Postelnicu², Isabelle Penel³

¹Cabinet Marcel Monny Lobe, Soisy Sous Montmorency, France

²EHPAD Arpage Jacques Offenbach, Arpad, Epinau sur Seine, France

³EHPAD La Cerisaie, Montmorency, France

More than 1% of the total population in France are under treatment by oral anticoagulants using Vitamin K antagonists. Use, misuse, underuse and overuse are frequent. National guidelines of good practices for overdosage management by using INRs of patients under anticoagulants have been widely published.

We underwent a survey of 167 INRs performed in 2 nursing homes in 18 patients over 80 years old under Vitamin K Antagonists during the last six months. All were asymptomatic of bleeds. The results were classified into 5 groups with the respective distribution: A (INR <2):38.92% (65/167), B (2 ≤ INR <3): 51.49% (85/167), C (3 ≤ INR < 4):9.58% (16/167,) D (4 ≤ INR < 6): 1.79% (7/167),E (INR ≥ 6):3/167. While INR ≥ 4, guidelines recommend to skip the intake of the prescribed dose, we found only 57.13% of compliance to guidelines (4/7 in group D). And while INR ≥ 6 we found 66.66% of patients having their treatment stopped and with the oral administration of 1 to 2 mg Vitamin K.

An overall of 15.6% of the patients > 80 years old had an overdosage with an INR > 3 knowing that the risk of bleeds in elderly patients remains high.

Our survey showed that half of the elderly patients having oral anticoagulants were well controlled with an INR between 2 and 3, In patients with asymptomatic overdoasge, decisions in accordance with guidelines could be improved. Overdosage with an INR > 6 should be managed perfectly by applying systematically the national guidelines. Administration of oral vitamin K may be done by nurses while INR > 6 in case of non availability of the primary care practitioner for the decision.

Keywords: INR, anticoagulants, Vitamin K antagonists, elderly patients

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Note to Editor	: Decision share is the key issue, lots of GPs have to answer to nurses by phone on dosage adaptation and overdosage management. Guidelines are simple to apply by all health care professionnals. Nurses could become the key actor for decision applying guidelines.
Presenter	: Gerard Nguyen (dr.gerard.nguyen@gmail.com)

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