



LITTLE ARGUMENTATION FOR PHARMACOTHERAPEUTIC DECISIONS IN CASE REPORTS

RJ van Unen*, T Schutte*, J Tichelaar J, ThPGM de Vries, MC Richir, MA van Agtmael
*contributed equally

RECIPE (Research and Expertise Center In Pharmacotherapy Education)

Department of Internal medicine, section Pharmacotherapy VU University Medical Center, Amsterdam, the Netherlands

Introduction

Reading clinical case reports is one of the ways clinicians learn and maintain their clinical reasoning skills

Case reports, however, seem to focus mainly on diagnostic reasoning

Doctors in training experience a deficit in education in pharmacotherapeutic reasoning [1,2,3]

AIM

To analyze to what degree pharmacotherapeutic reasoning is discussed in case reports

Methods

Review of clinical cases published in four high impact medical journals (BMJ, Lancet, NEJM, and JAMA) and seven pharmacology/pharmacotherapeutic journals

For every drug therapy started in these case reports, information regarding the therapeutic decision and information regarding the therapeutic reasoning was assessed

A score form based on the WHO 6-step was used [4]

Two researcher independently assessed the case reports. When there was disagreement they met for consensus

Results

Pubmed was searched for articles classified as case report in the first half year of 2014

We identified 179 articles, 152 of which we classified as case reports

In 97 case reports a total of 371 drugs were started

Item	General medicine Journals (n=318)	Pharmacotherapy journals (n=53)
THERAPEUTIC DECISION		
Drugname	85%	100%*
Drug dose	17%	70%*
Frequency	14%	59%*
Administration of drug	23%	23%
THERAPEUTIC REASONING		
Guideline used	33%	32%
Contra-indications	1%	2%
Interactions	1%	2%
Side effects	2%	4%
Suitability for patient	3%	8%

Table 1: percentage of case reports that mentioned the item.
* P < 0.05 *Fisher exact test

Conclusion

There is little argumentation for pharmacotherapeutic decisions made in case reports

Discussion

Although pharmacotherapeutic reasoning is hard to assess, even using a 'simple' score form shows that there is little attention for explaining therapy choices

More structured argumentation for pharmacotherapeutic decisions might be a valuable contribution in pharmacotherapeutic reasoning education

We propose a more detailed description of pharmacotherapeutic reasoning in case reports, e.g. by using some steps of the WHO-6-step method



R. van Unen
r.vanunen@vumc.nl



T. Schutte
t.schutte@vumc.nl

References

- (1) Heaton *et al.* Br J Clin Pharmacol 2008; 66(1):128-134
- (2) Prince *et al.* Educ Health 2004; 17(3):323-331
- (3) Tobaiqy *et al.* Br J Clin Pharmacol 2007; 64(3):363-372
- (4) de Vries *et al.* WHO 1995