EDITORIAL

Pharmacovigilance Centres in Detection of Medication Errors and Ensuring Patient Safety

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Medicines affect the lives of hundreds of millions of people every day. They have not only helped regain health from diseases but to bring improved health and longer life to the human race. However, they are not without risk. They have caused, do cause and will continue to cause lesser or greater harm to a number of people alongside their benefits.

Medication errors have important implications for patient safety and their identification is a main target in improving clinical practice errors, in order to prevent adverse events. Error detection is the first crucial step in patient safety measures. Approaches to this are likely to be different in research and routine care and the most suitable must be chosen according to the setting. The major methods for detecting medication errors and associated adverse drug-related events are chart review, computerized monitoring, administrative databases and claims data, using direct observation, incident reporting, and patient monitoring (1).

However, databases of Pharmacovigilance Centres can detect, identify, analyse and classify medication errors and carry out root cause analysis, which is an important tool in preventing medication errors (2).Time to time Pharmacovigilance medication error audit meetings with the clinical colleagues with adoption of generalized approach can go long way in ensuring the patient safety.

Recently, few studies have pointed that Pharmacovigilance Centres very effectively are able to detect medication errors and help ensuring patient safety (3-5). In a recent study, the incidence of preventable ADEs was 25%, of which 4.3% were due to medication errors and were deemed preventable (5).

However, to enhance detection of medication errors by pharmacovigilance centres, reports should be prospectively reviewed for meaningful insight into the nature of the underlying systems defects that caused the error and thus ADR. Presently in the SOP of PvPI operating throughout country the centers are not suppose to generate database of medication error. Also generating such database may increase workload for the centre. Moreover, it may further increase the challenge of underreporting of ADRs due to associated apprehensions but still can prove a major step in ensuring the patient safety.

Therefore, to ensure the safety of patients who receive medication there is not only a need for rationale prescribing but also to have effective surveillance systems and one of the duties of pharmacovigilance centers beyond ADR reporting is to identify medication errors and inform health-care professionals about such errors and creating a culture of patient safety

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