

Depression Management Physician Order: New initiatives at the Mental Hospital of Ministry of Health in Saudi Arabia

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Abstract

The general administration of pharmaceutical care stated evidence-based pharmacy guidelines at Ministry of Health hospitals and primary healthcare centers in 2015. That has included several programs related to anticoagulation, pain management, and antibiotics. The new initiative's project from the most significant mental hospital in Riyadh region of starting psychiatric disease drug therapy management physician order. The hospital started with a standard disease like depression. The task force team designed the updated guidelines and approved by an official body in the hospital. The form friendly used and very important in preventing drug-related problems and education system for healthcare staff.

Key words: Depression management, Physician Order, Ministry of Health, Saudi Arabia.

INTRODUCTION

The evidence-based medicine system started at Ministry of Health in 2014 with founded of evidence-based healthcare center. The Center released several evidence-based guidelines.^[1] The general administration of pharmaceutical care shared in publications of those guidelines.^[2-3] The administration started evidence-based pharmacy system in early 2015 through drug information center.^[4] Several national pharmacy practice programs implemented at Ministry of health hospitals including stewardship antimicrobial program, anticoagulation system and pain management services.^[5-6] Those guidelines are formatted as physician order prescribing method. The most significant mental hospital in Ministry of Health at Riyadh region of Kingdom of Saudi Arabia stated new initiative psychiatric management physician order system. They started with the typical psychiatric disease, for instance, depression, schizophrenia, and bipolar disorders. Several publications explore the impact of guidelines at mental hospitals.^[7-9] The authors not familiar with any investigations in Saudi Arabia or Gulf and Middle East countries discussed depression therapy physician order guidelines.^[10-12] The goals of the mini-review to explore the new initiatives of depression physicians order system at the Mental hospital of Ministry of health in Kingdom of Saudi Arabia.

Depression Therapy order in Saudi Arabia

The depression physician order form consisted of patient demographic data, the type or stage of disease, the first line of treatment, the dose and duration

of therapy, and the second line of choice if existed. The comorbid disease with primary disease and appropriate choice for each combined disease. The prescribed data and clinical pharmacist data as explored in the physician order form. The form can quickly convert to the electronic format in the computer pharmacy system as explored in appendix 1.

SWOT Analysis

The SWOT analysis used for the project. The strong points of the project were a clinical pathway of psychiatric management, educational tool for new staff; it fit the accreditation and requirements of national organizations of accreditation health care institutions, it is control of hospital formulary and prevents miss-use if medications. The forms not covered all psychiatric disease, it is not contained all antipsychotic medications, it was not an electronic format. The opportunities points were part of accreditation requirements, and threads points were it not followed by healthcare staff, the new updating of the therapeutic guidelines.

Implementations steps of Depression management physician Order

It is evidence-based setting up psychiatric therapeutic guidelines at the most prominent hospital a mental hospital at Ministry of Health in Kingdom

of Saudi Arabia. The guidelines based on evidence based on American psychiatric society recommendations. It designed through pharmacy task force team and headed by the author. The team consisted of the head of the pharmacy, drug information pharmacist, four clinical pharmacists at acute and ambulatory care services, and medications safety office and inpatient and outpatient supervisor. The team divided into several three groups. Each group made different therapeutic management guidelines for common disease depression, schizophrenia, and bipolar disorders. The first draft finished by the teams then covered as physician order format by the first author. The therapeutic physician order revised by the three groups. The team made several for discussion and final agreement. The head of the pharmacy submits to the pharmacy and therapeutic for final approval. The psychiatric therapeutic physician order approved by the committee after several discussion and meeting. The guidelines implemented through several educational sessions with hospital staff. The manual physician order sent to information technology to convert as electronic physicians order entry.

CONCLUSION

The depression management therapy physician order is a new initiative program at the Mental hospital of Ministry of health in Saudi Arabia. The new project may prevent the drug-related problem and prevent economic burden in Healthcare system.

ACKNOWLEDGMENT

None.

CONFLICT OF INTEREST

None.

ABBREVIATION USED

None.

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Al-Amal Medical Complex
Pharmaceutical Care Department
Riyadh Region
Physician Order Form

(Please fill all applicable information and stick it on patient profile, and forward the copy to the Pharmacy Department within 24 hrs)

FILE NO.
NAME: _____
AGE: SEX: M F
NATIONALITY: _____
WEIGHT (ACTUAL/ESTIMATED) _____ KG
HEIGHT: _____ CM
ALLERGY: _____
DIAGNOSIS: _____
WARD: _____ BED _____
CONSULTANT IN CHARGE: _____

Adult Depression management(1)(2)

Diagnosis:

General Depression

Condition	Dose	Therapy	Comments(1)(3)(4)
1 st choice	1.....	Fluoxetine	Starting dose 20mg, Maintenance dose 20-60mg Maximum dose 80mg OR
	2.....	Escitalopram	Starting dose 10mg, Maintenance dose 10-20mg Maximum dose 20m
2 nd choice	.....	Venlafaxine	1) Immediate-Release a) Initial dosage and titration: 75 mg/day orally in 2 or 3 divided doses; may increase dosage by 75 mg/day every 4 days b) Maximum dosage (outpatients): 225 mg/day c) Maximum dosage (inpatients): 375 mg/day in 3 divided doses 2) Extended-Release a) Initial dosage and titration: 37.5 to 75 mg/day orally once daily; may increase dosage by 75 mg/day every 4 days b) Maximum dosage: 225 mg/day
3 rd choice	.....	Mirtazapine	Starting dose 15mg, Maintenance dose 15-30mg Maximum dose 45mg

Resistance Depression

SSRI or SNRI PLUS

Condition	Dose	Therapy	Comments
1 st choice	1.....	Lithium	Starting dose Initiate at a low dose (eg, 300 mg once daily or 300 mg twice daily); increase gradually based on response and tolerability; usual dosage: 600 to 1200 mg daily in divided doses OR
	2.....	Quetiapine	Starting dose 50 mg once daily on days 1 and 2; increase to 150 mg in divided doses, on day 3. Usual dosage range: 150 to 300 mg daily; Maximum dose: 300 mg once daily. OR
2 nd choice	.....	Bupropion	Starting dose XL: 150mg, Maintenance dose 150-300mg Maximum dose 450mg OR
3 rd choice	.....	Aripiprazole	Starting dose 5mg, Maintenance dose 5-20mg Maximum dose 20mg OR
4 th choice	Mirtazapine	Starting dose 15mg, Maintenance dose 15-30mg Maximum dose 45mg

Depression with OCD

Condition	Dose	Therapy	Comments
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1 st choice	1.....	Clomipramine	Starting dose 25mg, Maintenance dose 100mg Maximum dose 250mg OR
	2.....	Fluvoxamine	Starting dose 50mg, Maintenance dose 100-300mg Maximum dose 300mg

Depression with chronic diseases

Condition	Dose	Therapy	Comments
Diabetes or High cholesterol level	1.....	Fluoxetine	Starting dose 20mg, Maintenance dose 20-60mg OR
	2.....	Duloxetine (Diabetic neuropathy)	Starting dose 60mg, Maintenance dose 60-120mg
Cardiovascular disease or Hypertension or Arrhythmia or elderly	1.....	Fluoxetine	Starting dose 20mg, Maintenance dose 20-60mg OR
	2.....	Escitalopram	Starting dose 10mg, Maintenance dose 10-20mg
Stroke	1.....	Escitalopram	Starting dose 10mg, Maintenance dose 10-20mg OR
	2.....	Mirtazapine	Starting dose 15mg, Maintenance dose 30-45mg
Hyperprolactinemia	1.....	Mirtazapine	Starting dose 15mg, Maintenance dose 15-45mg
Renal impairment	1.....	Escitalopram	Mild to moderate renal impairment: No adjustment recommended caution is advised if GFR < 30 mL/min so start with a low dose and increase slowly
Hepatic impairment	1.....	Imipramine	Start with 25mg/day and titrate slowly (weekly) if required
	1.....	Escitalopram	Dose 10mg/day

NOTES :

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Physician/Clinical Pharmacist Name: pager:.....

Physician/Clinical Pharmacist signature:.....

Nurse name: Nurse signature:

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