Pharmacy Residency Research Project Proposal

**WORKING TITLE OF THE PROJECT**
Expert Consensus on Home Antidepressant and Antipsychotic Medication Continuation in Critical Care Patients

**PRINCIPLE INVESTIGATOR**
Jessica Beach (Clinical Pharmacy Specialist - Critical Care)

**CO-INVESTIGATORS**
Sean Gorman (Coordinator, Clinical Quality & Research – IH Pharmacy Services)
Nunzio Barone (Clinical Pharmacist – Psychiatry)

**RESEARCH SITE(s)**
PI based out of Royal Inland Hospital, study will be completed electronically including pharmacists at many different sites

**STATE YOUR PROPOSED RESEARCH QUESTION AND DESIGN**

**POPULATION:** Intensive care & psychiatry pharmacists across Canada

**INTERVENTION (IF APPLICABLE):** 3 rounds of electronic questionnaires (utilizing a modified Delphi methodology) to quantify beliefs and practices around initiation of home antidepressants and antipsychotics (specifically for mental health indications)

**COMPARATORS (IF APPLICABLE):** n/a

**OUTCOMES:** Key factors influencing the decision around when to re-initiate home antidepressant and antipsychotic medications

**STUDY DESIGN:** Prospective consensus-building study

**PRIMARY OBJECTIVE:**
To develop expert consensus on key factors for continuation and discontinuation of antidepressant and antipsychotic medications during ICU admission including physiologic, logistic, and other reasons

**SECONDARY OBJECTIVE:**
To seek consensus from the expert panel around future research priorities and directions around this topic
RATIONALE (LIMIT TO 150 WORDS)

Antidepressants and antipsychotics are commonly prescribed medications in the community. Small retrospective studies have suggested that early initiation of home antipsychotic and antidepressant medications is associated with a decreased risk of withdrawal symptoms and delirium while admitted to the ICU. A recent systematic review was unable to identify good quality evidence about the potential benefits or harms of resuming SSRI/SNRI medications in the ICU setting, thus there is lack of literature guidance around continuing home antidepressants during ICU admission.

There are a variety of reasons why care teams may withhold these medications during ICU admission including: decreased level of consciousness, renal dysfunction, active bleed, suspected overdose, lack of enteral access, drug interactions or medication not available on hospital formulary. By soliciting the opinions of pharmacotherapy experts in critical care and psychiatry, the goal is to establish guidance around when it is appropriate and safe to continue with home antidepressant and antipsychotic medications in this patient population.

SIGNIFICANCE (LIMIT TO 100 WORDS)

Gaining a consensus for appropriate antidepressant/antipsychotic prescribing for critical care patients may help guide future interventions to optimize prescribing of use of these medications this population.

PROPOSED RESEARCH METHODS

This will be a prospective consensus-building study conducted using a modified Delphi approach to develop a list of key factors to consider around continuation vs. discontinuation of home antipsychotics and antidepressants during ICU admission. Expert participants throughout Canada will be recruited to participate in 3 rounds of anonymous questionnaires using an online survey platform. Consensus will be determined after all 3 Delphi rounds have been completed based on a priori-established criteria.

FUNDING SOURCES

No funding required

ANTICIPATED START DATE OF THE RESIDENCY PROJECT

June 2018

ANTICIPATED END DATE OF THE RESIDENCY PROJECT (CONSIDER FOR FEASIBILITY OF RESIDENCY PROJECT)

April 2019

PROJECT SUITABILITY (FOCUS ON RESIDENCY PROJECT SUITABILITY)

After consideration of the “FINER” criteria (Feasible, Interesting, Novel, Ethical, Relevant) I believe that the project meets all the Project Suitability Criteria_____ (indicate YES/NO)

REFERENCES:
