

Educational intervention can cut inappropriate PPI prescriptions

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"We significantly reduced discharge [prescriptions](#) for PPIs through the implementation of an educational initiative paired with a web-based quality improvement tool," the authors write. "An active interventional strategy is likely required considering the increasingly recognized and preventable adverse events associated with PPI misuse."

More information: [Abstract](#)
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(HealthDay)—A monthly educational intervention paired with a web-based quality improvement tool is feasible for increasing the proportion of inappropriate proton pump inhibitor (PPI) prescriptions discontinued at hospital discharge, according to a study published online Feb. 24 in the *Journal of Hospital Medicine*.

Emily G. McDonald, M.D., from the McGill University Health Center in Montreal, and colleagues conducted a before-after study involving a monthly educational intervention paired with a web-based quality improvement tool to reduce inappropriate PPI prescriptions. Data were compared for 464 consecutively admitted patients in the pre-intervention control group and 640 consecutively admitted patients in the [intervention group](#).

The researchers found that before hospitalization, 44 percent of patients were using a PPI. Only 54 percent of evaluated patients had an evidence-based indication for ongoing use. There was an increase in the proportion of PPIs discontinued at [hospital discharge](#), from 7.7 percent per month in the six months before the intervention to 18.5 percent per month post-intervention (P = 0.03).

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