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Exploring reasons for poor adherence to a trust's warfarin initiation protocol

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Abstract

Warfarin is the most commonly prescribed oral anticoagulant in the UK, demonstrating effectiveness in preventing and managing a range of thrombotic conditions. However due to factors including unpredictable pharmacokinetics, numerous drug interactions and a narrow therapeutic range, reaching and maintaining therapeutic anticoagulation can be challenging. The risks of over-anticoagulation and major bleeding are highest in the first four weeks of warfarin therapy. To reduce the risk of bleeding related to warfarin initiation in one large UK-based Trust a warfarin initiation protocol was introduced. However, previous Trust-wide audits revealed poor adherence to the protocol. The aim of this study was to identify reasons for poor adherence to the protocol. Thirteen junior doctors across the Trust were interviewed using a semi-structured tool. In addition, a related questionnaire was designed and distributed to junior doctors at training sessions to capture a wider sample. Key findings of the study suggested that participants were aware of the protocol; with 85% of 20 surveyed participants and 92% of 13 interviewees indicating awareness. However a number of potential barriers to protocol adherence were identified. Barriers included protocol inaccessibility; concern of the safety of the protocol's fixed dose regimen without INR monitoring for the first four days of therapy; discrepancy between the Trust's 'modest' initiation protocol and the more aggressive warfarin initiation regimens generally favoured by participants' seniors. The study highlighted the need to address concerns about the safety of the protocol, increase awareness of the Trust protocol to all levels of prescriber and improve protocol accessibility.

Biography

Frances first started working in anticoagulation in 2002 when she commenced a PhD which explored the redesign of anticoagulation services in different care settings. Over the years, Frances has delivered a variety of anticoagulation services in secondary and primary care. As part of her current role she provides leadership through promoting clinical governance as it pertains to anticoagulation. Frances is a member of the UKCPA Haemostasis Anticoagulation and Thrombosis committee and a board member of the multidisciplinary Anticoagulation in Practice Society, contributing to the educational and conference activities of both. Aside from anticoagulation, Frances has an interest in medicines adherence.

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