



## Preventing the Biggest Cause of Adverse Drug Reactions

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Non-Medical Home Care  
that prevents medical  
problems

Fast Response to Your  
Referrals  
Ability to provide a  
caregiver within 24 hours  
of initial visit – sometimes  
the same day.

Proven Reliability  
Our caregivers use a  
telephonic check in system  
that enables us to know  
exactly where caregivers  
are at all times. We  
constantly monitor and  
ensure punctuality and  
reliability.

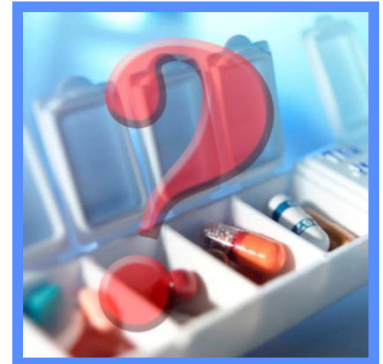
More than 100 caring  
professionals strong in  
Chicago area.



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Owner / President

- Physical Therapist with 24 years hospital and home health experience. Board Certified in Orthopedics.
- Acute Care Hospital Administrator
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A large study with over 30,000 patient-years of observation concluded that 28% of adverse drug reactions (ADRs) were avoidable.<sup>1</sup> Dividing therapy into the acts of prescribing, monitoring, and compliance, researchers showed that **more than 58% of the errors leading to ADRs occurred in monitoring and compliance.**<sup>1</sup> In short, patients are responsible for many of their own adverse drug reactions. Medication non-adherence and adverse drug reactions rank as a leading cause of early readmissions to inpatient facilities. If you have patients who are at risk for inadvertent under-dosing, overdosing, or other forms of medication non-adherence, remember that Assisting Hands Home Care may be able to help.



**Elderly Patients:** Your elderly patients present particular risk for adverse drug reactions. Pharmaceutical companies are less likely to research their drugs extensively with elderly populations. Drug absorption and metabolism are more variable and less predictable among the elderly. The highest rates of adverse drug reactions occur among octogenarians.<sup>2</sup> A high risk for ADRs is found with elderly patients suffering multiple medical conditions, taking multiple medications, having a history of adverse drug reactions, *or* having a reduced capacity to eliminate medications.<sup>3</sup>

Failure to comply with medication schedules may result from confusion, forgetfulness, impaired judgment, limited transportation, or miscommunications between caregivers. Even home health nurses, with their access to a patient's medicine cabinet, note that elderly patients will often overstate their abilities and convince care planners that they can be completely independent with medication administration. If you suspect a patient may be unable to reliably manage his or her own medications at home, consider this. Medication management may not be the only activity of daily living presenting health and safety challenges to your patient. **Call Assisting Hands Home Care for a thorough, in-home evaluation that will determine patient needs for assistance with activities of daily living such as medication adherence.**

**How Assisting Hands Prevents Adverse Drug Reactions:** The certified nursing assistants of Assisting Hands Home Care can monitor compliance with medication schedules, provide reminders, provide assistance with self-administered medication, and assist with transportation for pharmacy pick-ups and doctor's appointments. Because our nursing assistants work in your patients' homes for hours each day, we get to know each patient and can help identify changes in condition such as confusion or weight gain. Our nursing assistants report concerns to their supervisors. When supervisors verify concerns, they will facilitate follow-up with your patient's primary care practitioner or specialist as needed.



### Fast Response to Your Referrals

Inasmuch as our private duty home care services can be important for preventing exacerbations of health conditions, when discharge planners or doctors make a referral, prompt response is important. Assisting Hands has the ability to provide a caregiver within 24 hours of the initial visit – and sometimes on the same day.

*Please tell your patients about Assisting Hands Home Care®  
Quality Home Care You Can Trust®*

## References

1. Gurwitz JH, Field TS, Harrold LR, et al. "Incidence and preventability of adverse drug events among older persons in the ambulatory setting." *JAMA* 2003; 289: 1107-1116.
2. Ghose K. "The need for a review journal of drug use and the elderly." *Drugs Aging*. 1991: 2-5.
3. Young LR, Wurtzbacher JD, Blankenship CS. "Adverse drug reactions: a review for healthcare practitioners." *Am J Manag Care*. 1997; 3: 1884-1906.