

# An educational intervention to improve adverse drug reactions reporting: a cluster-randomised trial among Portuguese physicians and pharmacists

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		<input type="checkbox"/> Protocol
<b>Registration date</b> 15/06/2006	<b>Overall study status</b> Completed	<input type="checkbox"/> Statistical analysis plan
		<input checked="" type="checkbox"/> Results
<b>Last Edited</b> 11/07/2019	<b>Condition category</b> Other	<input type="checkbox"/> Individual participant data

**Plain English summary of protocol**  
Not provided at time of registration

## Contact information

**Type(s)**  
Scientific

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## Additional identifiers

**Protocol serial number**  
N/A

## Study information

**Scientific Title**

An educational intervention to improve adverse drug reactions reporting: a cluster-randomised trial among Portuguese physicians and pharmacists

### **Study objectives**

1. An educative intervention enhances the rate of reporting adverse drug reaction
2. An educative intervention enhances the quality of reporting, in terms of its relevance to the pharmacosurveillance system
3. Duration of the effect in terms of quantity and relevance could be more than one year

### **Ethics approval required**

Old ethics approval format

### **Ethics approval(s)**

In Portugal, educational interventions are not evaluated by ethical committees. In hospitals, it is the teaching committee that approves educational interventions. In communitarian pharmacies, we usually contact the pharmacist responsible by telephone.

### **Study design**

Cluster-randomized controlled trial

### **Primary study design**

Interventional

### **Study type(s)**

Treatment

### **Health condition(s) or problem(s) studied**

Under-reporting of adverse drug reactions

### **Interventions**

We implemented a continuing medical education multifaceted intervention comprising of an outreach visit, reminder and report form. The main didactic material used for this purpose was a two-part presentation. The first part included definitions of pharmacosurveillance and adverse drug reaction, a number of international studies on morbidity and mortality, hospital admissions and the cost to health systems and patients, followed by the methods used in pharmacosurveillance and in spontaneous reporting systems in particular, explaining that underreporting constituted the system's principal limitation. The second part was designed to change the five attitudes identified by the previous case-control study as being associated with underreporting, and for this section we created animated pictures that depicted a physicians daily work. Lastly, emphasis was laid on the fact that only five minutes was required to complete the report form. The control group clusters did not receive the intervention but, like those in the intervention group, did receive the briefing and standard training given by Portugal's northern pharmacovigilance unit.

### **Intervention Type**

Other

### **Phase**

Not Specified

### **Primary outcome(s)**

Rate of total notifications per month

**Key secondary outcome(s)**

Rate of serious, unexpected, high-causality, and new-drug-related adverse drug reactions per month

**Completion date**

30/06/2005

## Eligibility

**Key inclusion criteria**

All National Health System physicians working in the Northern Region of Portugal and all pharmacists working in the same geographical area.

**Participant type(s)**

Patient

**Healthy volunteers allowed**

No

**Age group**

Adult

**Sex**

All

**Total final enrolment**

1433

**Key exclusion criteria**

Physicians not involved in any clinical activity (e.g. engaged in administrative tasks, analysis, etc.); working in substance abuse and rehabilitation centers; working at the regional pharmacosurveillance center or any department having a specific voluntary adverse drug reaction reporting program and physicians attached to specific hospitals (cancer, maternity, etc). Pharmacists working at the regional pharmacosurveillance center and attached to specific hospitals (cancer, maternity, etc).

**Date of first enrolment**

16/03/2004

**Date of final enrolment**

30/06/2005

## Locations

**Countries of recruitment**

Portugal

Spain

**Study participating centre**  
**Dto. Medicina Preventiva**  
Santiago  
Spain  
15783

## Sponsor information

### Organisation

Educational Development Program for Portugal (Programa de Desenvolvimento Educativo para Portugal) (PRODEP) (Portugal)

## Funder(s)

### Funder type

University/education

### Funder Name

Educational Development Programme for Portugal (Programa de Desenvolvimento Educativo para Portugal) (PRODEP) (Portugal)

## Results and Publications

### Individual participant data (IPD) sharing plan

### IPD sharing plan summary

Not provided at time of registration

### Study outputs

Output type	Details	Date created	Date added	Peer reviewed?	Patient-facing?
<a href="#">Results article</a>	results	01/05/2008	11/07/2019	Yes	No