## PSYCHOTROPICS AND NONPRESCRIPTION PRODUCTS INTERACTIONS: CURRENT AWARENESS AND PROFESSIONAL PRACTICE

## I.I. Udo<sup>1</sup>, U. Rajendhran<sup>2</sup>, A. Bell<sup>3</sup>, K. Phelps<sup>4</sup>, A. Nzekwe<sup>5</sup>

<sup>1</sup>Academic Psychiatry, Durham University, Stockton, <sup>2</sup>Psychiatry, North Essex Partnership NHS Foundation Trust, Essex, <sup>3</sup>Adult Mental Health, <sup>4</sup>Pharmacy, Tees, Esk & Wear Valleys NHS Foundation Trust, Middlesbrough, <sup>5</sup>Adult Mental Health, West Park Hospital, Tees, Esk & Wear Valleys NHS Foundation Trust, Darlington, UK

**Introduction:** Choosing appropriate medication when faced with intolerance or treatment non-efficacy can be challenging. Evidenced reasons for non-efficacy include medicinal interactions. Interactions between non prescribed products and psychotropics may be overlooked with negative consequences for clinical effectiveness and/or patient safety. **Aim:** This study was conducted to explore the awareness and current practice of doctors in Tees, Esk and Wear Valleys NHS Foundation Trust (TEWV) with regards to obtaining and documentation of information on service users' use of nonprescription products.

**Method:** TEWV "Policy for Medicines Reconciliation on Admission of Adults to Hospital" states that lists of medicines prescribed by GP including those bought over the counter should be one of the minimum information available on admission. The availability of this information should ensure continuity of care and identification of adverse interactions. An electronic survey, using semi quantitative questionnaire, of doctors of all grades within the trust was used.

**Results:** 69 responses were received. There was a high level (94.2%) of awareness of potential interactions and a corresponding high standard (94.2%) of practice in enquiring about use in medication history. Only 78.3% would document this and where indicated, only 50.7% would investigate further. There were 25 comments received under the themes of health concerns (4), choice and autonomy (5), responsibility (2), practice issues (10), survey design (1), training Issues (3). **Conclusion:** There was a high level of awareness among respondents but deficiency in documentation and further exploration indicating missed opportunities for health promotion.