

Title: CLINICAL PHARMACIST IMPACT ON DEPRESCRIBING UTILIZING THE VIONE METHODOLOGY WITHIN A KANSAS CITY GERIATRIC CLINIC.

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BACKGROUND: The VIONE methodology was created by two geriatricians at the Central Arkansas Veteran Affairs (CAVHS) with the intent of standardizing the deprescribing process. The acronym “VIONE” is short for Vital, Important, Optional, Not indicated, and Every medication with an indication. Currently, at the Kansas City Veteran Affairs (KCVA) healthcare system no standardized deprescribing tool exists within the geriatric primary clinic. The aim of this quality improvement project was to implement the standardized deprescribing tool, VIONE within a geriatric clinic to reduce number of unnecessary prescriptions, reduce healthcare costs, and improve patient satisfaction.

METHODS: VIONE Risk Dashboard was used to enroll patients from the geriatric clinic into a pharmacist clinic for medication deprescribing. Identification and patient assessment was completed from August 2019 through March 2020, with a goal of achieving 25 patient visits. The primary analysis was average number of medications discontinued by the clinical pharmacist utilizing the VIONE methodology per patient. The secondary analysis was KCVA total cost avoidance within 1 year, medications deprescribed, and patient satisfaction of medication regimen.

RESULTS: On average approximately 2.8 medications were discontinued per patient with 71 unique medications deprescribed. The annualized cost avoidance calculated from the 25 patients was \$3,599.56. Majority of medications deprescribed were herbals and supplements (24%), ophthalmic drops (11%), and antihyperglycemics (10%). The patient/caregiver satisfaction exit survey which included 84% of the patient population showed an increase in satisfaction score by 5.3%.

CONCLUSION: Implementation of the VIONE tool in the GeriPACT setting resulted in reduced number of unnecessary prescriptions and reduced healthcare costs.

