THE IMPORTANCE OF PHARMACOTHERAPY REVIEW AND ITS IMPLICATION IN SAFE CARE FOR PREGNANT PATIENTS - CASE REPORT

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Introduction

Pharmacotherapy in pregnant women is a complex process due to the physiological changes that occur during pregnancy and the risk of teratogenic effects on the fetus. Pharmacotherapy review is essential to ensure patient safety and fetal development, with the clinical pharmacist playing a key role in this process. This report presents a case in which the pharmacotherapy review of a pregnant patient prevented potential complications. The purpose of the review is to report the pharmaceutical intervention performed during the pharmacotherapy review of a pregnant patient, highlighting its impact on safe care and the prevention of medication-related adverse events.

Material and Methods

The pharmacotherapy of a 32-year-old pregnant patient, in her second trimester, treated at an outpatient clinic, was reviewed. The patient had chronic arterial hypertension and hypothyroidism, and was using medications prescribed before pregnancy. The review process involved analyzing prescriptions, assessing potential drug interactions, and evaluating pregnancy risk categories according to the FDA classification. The pharmaceutical intervention included communication with the medical team for treatment adjustments.

Results and Discussion

During the review, the use of enalapril, an angiotensin-converting enzyme inhibitor (ACEI), classified as Category D by the FDA for pregnant women, was identified due to its risk of fetal injury, especially in the second and third trimesters. Additionally, the dose of levothyroxine prescribed for the treatment of hypothyroidism was inadequate, as pregnancy increases the body's demand for thyroid hormone. After the pharmaceutical intervention, enalapril was replaced by methyldopa, a safe antihypertensive agent during pregnancy, and the dose of levothyroxine was adjusted based on new laboratory tests. The patient was regularly monitored, resulting in stabilized blood pressure and adequate control of hypothyroidism.

Conclusion

This case illustrates the importance of pharmacotherapy review in pregnant patients to prevent adverse events and ensure safe care. The substitution of potentially teratogenic medications and dosage adjustments demonstrate the positive impact of pharmaceutical intervention. The role of the pharmacist in the multidisciplinary team is essential to optimize therapy and protect maternal and fetal health. Systematic pharmacotherapy reviews in pregnant women should be encouraged in all healthcare settings.

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