ECG MONITORING OF PATIENTS ON HIGH DOSE METHADONE - A RE-AUDIT



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Methadone is associated with adverse cardiac events, mainly QTc prolongation (Martin et al, 2011).

Department of Health (2007) recommend that all patients receiving 100mls (100mg) or more of methadone per day have annual ECG monitoring.

AIMS

- To identify all patients in receipt of high dose methadone and to determine if this was recorded at MDT meeting.
- To establish the number of patients who had an annual ECG.
- To identify those prescribed by Primary Care, if reminder letters for annual ECG were sent to GP and if their ECGs were included in medical notes.
- To determine the prevalence of borderline QTc intervals.
- To compare practice from January 2015- January 2016.

METHODS

Chart reviews of methadone prescribed patients in 2015 (n=148) and 2016 (n=129).

Results 2015

12 /148 (8%) patients were prescribed high dose methadone, all had notation of this in MDT records.

11/12 (92%) had up to date annual ECG. The one patient without had been requested to do so on a number of occasions.

2/12 (17%) patients were prescribed by GP and both had up to date ECGs.

8/11 (73%) patients had a normal ECG and **3/11 (27%)** had borderline QTc intervals with notation to redo within a specified period.

Results 2016

16/129 (12%) patients were prescribed high dose and all had notation of this in MDT records.

12/16 (75%) had an up to date ECG. **3/4 (75%)** without an ECG had a recent increase (within 4 weeks) to high dose The remaining patient was prescribed by GP and a reminder letter had been issued.

3/12 (25%) patients had borderline QTc intervals and notation to redo.

CONCLUSIONS AND RECOMMENDATIONS

There are broadly similar outcomes in MDT working practice between 2015 and 2016. The re-audit identifies recent increases to high dose prescribing. There are no guidelines in relation to how soon an ECG needs to be undertaken when switching to high dose. We recommend a target of 6 weeks. All ECG request forms should be uploaded to Electronic Care Record (ECR).