

## 〔一般論文〕

回復期リハビリ病棟における病棟薬剤業務開始前後の処方薬剤の検討：  
薬剤費、薬剤数、ジェネリック医薬品使用量の比較Survey on Prescription Drugs before and after the Start of Ward Pharmacy Service in  
the Convalescent Rehabilitation Ward: Comparison of the Drug Costs, the Number of  
Drugs and the Use of Generic Drug

三星 知\*, 山田 仁志, 稲月 幸範, 長井 一彦

SATORU MITSUBOSHI\*, HITOSHI YAMADA, YUKINORI INAZUKI, KAZUHIKO NAGAI

社会医療法人新潟勤労者医療協会下越病院薬剤課

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**Summary :** To obtain the influence of the proper use of the generic (GE) drug and the number of drugs by the ward pharmacy service, we investigated the costs and the number of oral drugs before and after the start of ward pharmacy service in the convalescent rehabilitation ward of the Kaetsu Hospital.

We used electronic charts and retrospectively investigated patients who were hospitalized from May to July of the previous year and also investigated hospitalized patients from May to July after the start of the ward pharmacy service in the convalescent rehabilitation ward.

The ratio of GE drug costs and number was significantly increased from 22% to 31% ( $p<0.01$ ) and from 38% to 41% ( $p=0.04$ ), respectively, by the ward pharmacy service. The number of drugs per patient, from hospitalization to discharge, prepared before and after the start of ward pharmacy service was +0.3 and -0.2, respectively. In addition, the number of GE drugs per patient from hospitalization to discharge, before and after the start of ward pharmacy service was +0.9 and +0.6, respectively. In the fracture patients' analysis, the number of GE drug was increased after the start of ward pharmacy service. In other disease patients' analysis, the number of drugs and the number of GE drugs was decreased.

We considered that the GE drug was promoted the proper use in the fracture patients, and that the number of drugs was decreased in other disease patients by the ward pharmacy service. Therefore, the number of drugs was decreased, and the number of GE drugs was increased by the ward pharmacy service.

**Key words :** generic drug, the convalescent rehabilitation ward, the ward pharmacy service, the drug costs, the number of drugs

**要旨：**病棟薬剤業務がジェネリック医薬品（GE 薬剤）の適正使用や処方薬剤数に及ぼす影響を調査するため、下越病院の回復期リハビリ病棟における病棟薬剤業務開始前後（介入前後）の病棟全体の内服薬の薬剤費と薬剤数を比較検討した。

調査方法は介入前年の5月～7月と介入後の5月～7月の回復期リハビリ病棟の入院患者を対象として、後方視的に電子カルテを用いて行った。

月ごとの薬剤費に占める GE 薬剤の割合は 22% から 31% ( $p<0.01$ )、薬剤数に占める GE 薬剤の割合も 38% から 41% ( $p=0.04$ ) とどちらも介入後に有意な増加を認めた。入退院時の薬剤数の変化は介入前が +0.3 剤、介入後が -0.2 剤と介入後に減少傾向を認めた。また、入退院時の GE 薬剤数の変化も介入前が +0.9 剤、介入後が +0.6 剤と減少傾向を認めた。疾患別の解析では介入後に骨折患者では GE 薬剤数の割合の増加傾向を認めた。一方、骨折以外の患者では薬剤数と GE 薬剤数の割合は減少傾向を認めた。

病棟薬剤業務により骨折患者では GE 薬剤の適正使用が推進でき、骨折以外の患者では薬剤数を減少できたと考えられる。従って、薬剤師が回復期リハビリ病棟で病棟薬剤業務を行うことで、患者の薬剤数の増加を抑えることができ、

\* 〒956-0814 新潟市秋葉区東金沢 1459-1

TEL : 0250-22-4711 FAX : 0250-22-4760

E-mail : Kaetsu\_kusuri@niigata-min.or.jp