

IV Zoledronic Acid post-discharge care for patients in the Trauma ward, Craigavon Area Hospital

Dr Seth Jamieson, Dr Kirsty Kirk, and Dr Plamena Rhead

Southern Trust NIMDTA

Introduction

Following the publication of 'Call to action: A Five nations consensus on the use of intravenous zoledronate after hip fracture,' Craigavon Area Hospital began offering IV Zoledronic acid (IV Zol) to patients with a fragility neck of femur (NOF) fracture. However, the administration of IV Zol is based on the bone health assessment, vitamin D level, and requires ongoing post-discharge care. An oral bisphosphonate should be started one year after IV Zol administration. This study aimed to analyse whether discharges from Craigavon Area hospital following a NOF fracture had clear instructions for post-discharge care.

Methodology

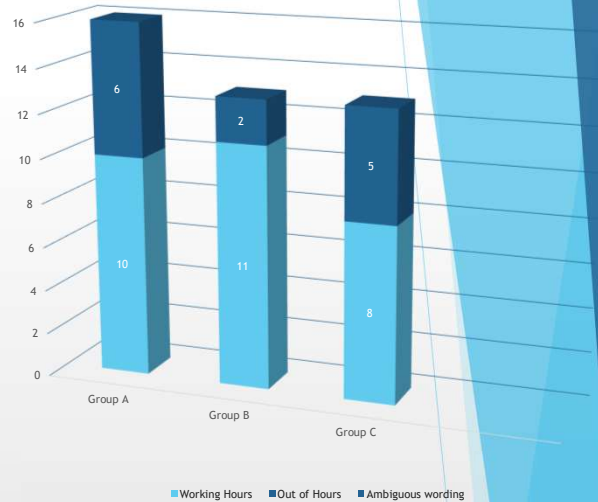
Discharge letters of patients with a NOF fracture from the Trauma Ward between 4/11/24 and 22/12/24 were divided into three groups: A (Bone health, IV Zoledronic acid and post discharge instructions), B (Bone health and IV Zoledronic acid mentioned but no post discharge instructions given) C (Bone health, IV Zoledronic acid and post discharge instructions not mentioned).

These groups were then analysed for potential interventions to improve future discharge letters. The second stage assessed the 4 week period between 14/1/25 and 18/2/25 with the same methodology.

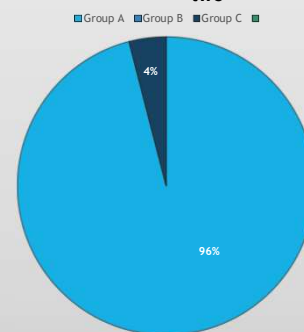
Discussion

Only 38% (16) of the 42 discharge letters were included in group A and 37.5% of these contained ambiguous instructions. There were 13 discharge letters in group B and C of which 15% and 38% were discharged during outside of normal working hours respectively. Standardised wording and poster reminders were implemented and the impact reassessed. In the second stage 96% of discharge letters contained a full bone health assessment with follow up instructions.

Graph 1: Categorisation of patient's discharge letters with a fractured neck of femur in Stage One



Graph 2: Categorisation of discharge letters in stage two



Conclusion

This study has highlighted the importance of adequate post discharge care for patients who have received IV Zoledronic acid. Unfortunately, many discharges did not mention the necessary information for GPs so proposals were made to improve ongoing care. The impact has been significant with 96% of letters containing the required information and so these changes will be introduced permanently.

References

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