

Rethinking ranitidine use in hospitals: how the ranitidine recall exposed a lack of evidence behind standardized hospital order sets

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Abstract

ii. Rationale, aims and objectives Fraser Health, a large health authority, undertook an audit of standardized order sets (SOS) listing ranitidine due to the Health Canada recall of ranitidine. Our primary objective was to determine if ranitidine use on SOSs was supported by the best available evidence, in order to sparingly use ranitidine in the hospital. ii. Method Two evaluators recorded the indication of ranitidine on every SOS and a scoping review of systematic review evidence was conducted in parallel to a comprehensive review of evidence quality. Clinical practice guideline recommendations were also recorded in order to make comparisons to systematic review evidence. iii. Results Twenty-seven SOSs were found. Seven SOSs (26%) clearly indicated the medical condition ranitidine was being used for. Twenty SOSs (74%) did not list an indication or had an unclear indication. Six SOSs (22%) were supported by systematic review evidence: 4 intensive care unit (ICU) SOSs for stress ulcer prophylaxis, 1 nausea and vomiting of pregnancy SOS for heartburn, and 1 emergency department SOS for heartburn iv. Conclusion The SOS ranitidine audit conducted at Fraser Health has highlighted inconsistencies between institutional prescribing policies and evidence. Drugs listed on SOSs should be carefully considered before being used at an institutional level. To aid prescribers' decision making, it may also be beneficial to indicate what the purpose of each drug is on a SOS Our team plans to use this as an opportunity to revise other ranitidine SOSs to reflect best evidence. Evaluation of how ranitidine or other drugs were being prescribed from SOSs is encouraged.

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