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AMERICAN SOCIETY OF
CLINICAL PSYCHOPHARMACOLOGY

EMBARGOED FOR RELEASE
December 10, 2018 at 5:30 PM Eastern

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Inaccurate Prescribing Warnings in Electronic Medical Record Systems: Results From an American Society of Clinical Psychopharmacology Membership Survey

Electronic prescribing is becoming widespread. All states allow it, some states require it, and many institutions now mandate electronic prescribing. Many electronic prescribing systems use computerized decision support algorithms that give automated warnings or alerts at the time of prescribing if a potential prescribing error is identified -- for example, regarding dosing or contraindications. Some studies suggest that electronic prescribing alerts may reduce prescribing errors and can be clinically useful, but others caution that the warnings may have substantial limitations and that clinicians often consider them clinically irrelevant. Harmful unintended consequences of such prescribing alerts have been described. Despite this topic's importance, few studies have examined the accuracy of automated prescribing warnings in electronic prescribing systems; to our knowledge no study has focused primarily on the accuracy of systems regarding prescribing of psychotropic medications. To examine this issue, we surveyed members of the American Society for Clinical Psychopharmacology (ASCP) regarding automated warnings generated by electronic prescribing systems.

The results indicated that a substantial proportion of prescribing clinicians with an interest in psychopharmacology believe that their electronic prescribing system has provided incorrect prescribing warnings. It is particularly problematic that some warnings do not reflect product labeling information -- for example, regarding maximum dose or contraindications. Such errors potentially have profound consequences. For example, the erroneous warning that SSRIs and aripiprazole are contraindicated for children and adolescents may cause inadequate treatment of potentially life-threatening conditions in this age group. It is also concerning that most respondents reported being unable to alert the system about the inaccuracy of a prescribing warning. Nonetheless, automated electronic prescribing alerts are potentially useful; a limitation of our survey is that it did not assess the perceived usefulness of alerts or the balance of perceived benefits versus perceived risks. Other limitations include the low survey response rate and the small number of responses for some questions. We also do not know whether all alerts considered erroneous were actually erroneous. Additional studies of this topic are needed, especially given increasing use of electronic prescribing and potentially detrimental clinical consequences of inaccurate prescribing warnings.

The American Society of Clinical Psychopharmacology (ASCP) was founded in 1992 to advance the science and practice of clinical psychopharmacology. Its over 1,200 members are physicians who study and practice psychopharmacology, as well as doctoral level investigators of clinical psychopharmacology or of pharmacology. ASCP members are advocates for clinical psychopharmacology and for clinical research. For more information, visit www.ascpp.org.

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<https://doi.org/10.4088/JCP.18ac12536>