



**Annual Congress 2022 of the
European Academy of Allergy and Clinical Immunology
Drug Allergy Reporting: Are we playing it safe in paediatrics?**

(Prague, Czech Republic, 1-3 July 2022) Background Self or parent reported allergies against antibiotics and other medications is an increasing problem in our hospitals, including in children's hospitals. Many of these described reactions are not due to an immune reaction to the medication and therefore not allergies by definition. There is an apparent lack of general public and doctor understanding of immune reactions, which has influenced the way reactions to medications are reported and this is highlighted in the study presented at the EAACI Annual Congress 2022.

335 children were examined with a reported antibiotic allergy, who had a total of 1650 admissions and 2241 medication charts, to assess the accuracy and consistency of drug allergy reporting. Consistent with guidelines, medication allergies should be documented in the following places; medication charts, in-patient notes and Adverse Drug Reaction (ADR) stickers applied.

All patients had at least one reported antibiotic allergy, 20% had multiple allergies including non-antibiotic drug allergies. The most common allergies were penicillin, followed by amoxicillin and cephalexin, which reflects their common use in the community.

Only two thirds of the medication charts had the allergy identified with a quarter of these were inconsistent across admissions. Inconsistencies included documenting a different reaction, additional drug added or a drug missing.

Of concern, 45 children with a reported beta-lactam allergy had a beta-lactam drug prescribed, 10% of these had a beta-lactam drug administered. Four patients were prescribed and administered the same culprit antibiotic. No non-antibiotic medications were incorrectly prescribed, which would suggest that errors maybe due to a lack of understanding of cross-reactivity within the antibiotic classes.

Nearly one third of admissions had inconsistency between in-patient notes and medication charts and one third did not have an ADR sticker that aligns with hospital policy.

In the paediatric hospital setting at Perth's Children Hospital, Western Australia, documentation of antibiotic allergies was frequently incomplete and inconsistent with a relatively high incidence of culprit antibiotics being prescribed and administered. These findings reflect the consequences and risk that arise from poor understanding of drug allergy amongst general medical staff. This is believed to be a widespread issue that is not just limited to this centre, however, this first paediatric study demonstrated the need for increased education and standardised documentation practices amongst all hospital staff.

Inaccurate drug allergy reporting can cause harm to patients. Accurate documentation of reported drug allergies can optimise medication therapy, decrease the incidence of adverse drug reactions, improve inappropriate prescribing, and improve overall patient care. Where a reported drug allergy is accurately documented it can also allow for appropriate clinical alerts and notifications to be put in place, to prevent future errors.

"I knew that documentation around allergies to medications was an issue within healthcare, however, until we did this study, I had not realised the extent of the problem," says Annabelle Arnold, Clinical Nurse Specialist – Drug Allergy, Department of Immunology, Perth Children's Hospital, Western Australia.



About EAACI:

The European Academy of Allergy and Clinical Immunology (EAACI) is an association of clinicians, researchers and allied health professionals founded in 1956. EAACI is dedicated to improving the health of people affected by allergic diseases. With more 13 000 members from 125 countries and over 75 National Allergy Societies, EAACI is the primary source of expertise in Europe and worldwide for all aspects of allergy.

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