

Dr. Sherif Ibrahim , Core psychiatry trainee year 3 .
Dr. Chanel Parmar , Core psychiatry trainee year 2 .
Dr. Rupa Gupta, Consultant in Intellectual Disability Psychiatry .

UK , Greater Manchester Mental Health NHS Foundation Trust , Bolton Division , Rivington unit .

Introduction

- The Bolton learning disability team initiated a project in 2020 to oversee valproate use in females with childbearing potential.
- Exposure to valproate during pregnancy dramatically increases risks of congenital malformations and neurodevelopmental disorders.
- Valproate is contraindicated in childbearing potential women unless they follow the "prevent" pregnancy prevention programme.
- Women under valproate treatment should undergo capacity assessment and complete the valproate Annual Risk Acknowledgement Form (ARAF).
- The Annual Risk Acknowledgement Form has three steps: determining if "prevent" is needed, confirming the patient's childbearing potential and risk of pregnancy, and ensuring the patient understands the risks of valproate during pregnancy.

Aim and Hypothesis

- This audit aimed to evaluate compliance with national guidelines and Greater Manchester Mental Health NHS Foundation Trust policies for safe sodium valproate prescription in females of childbearing potential within the Bolton Learning Disability team.

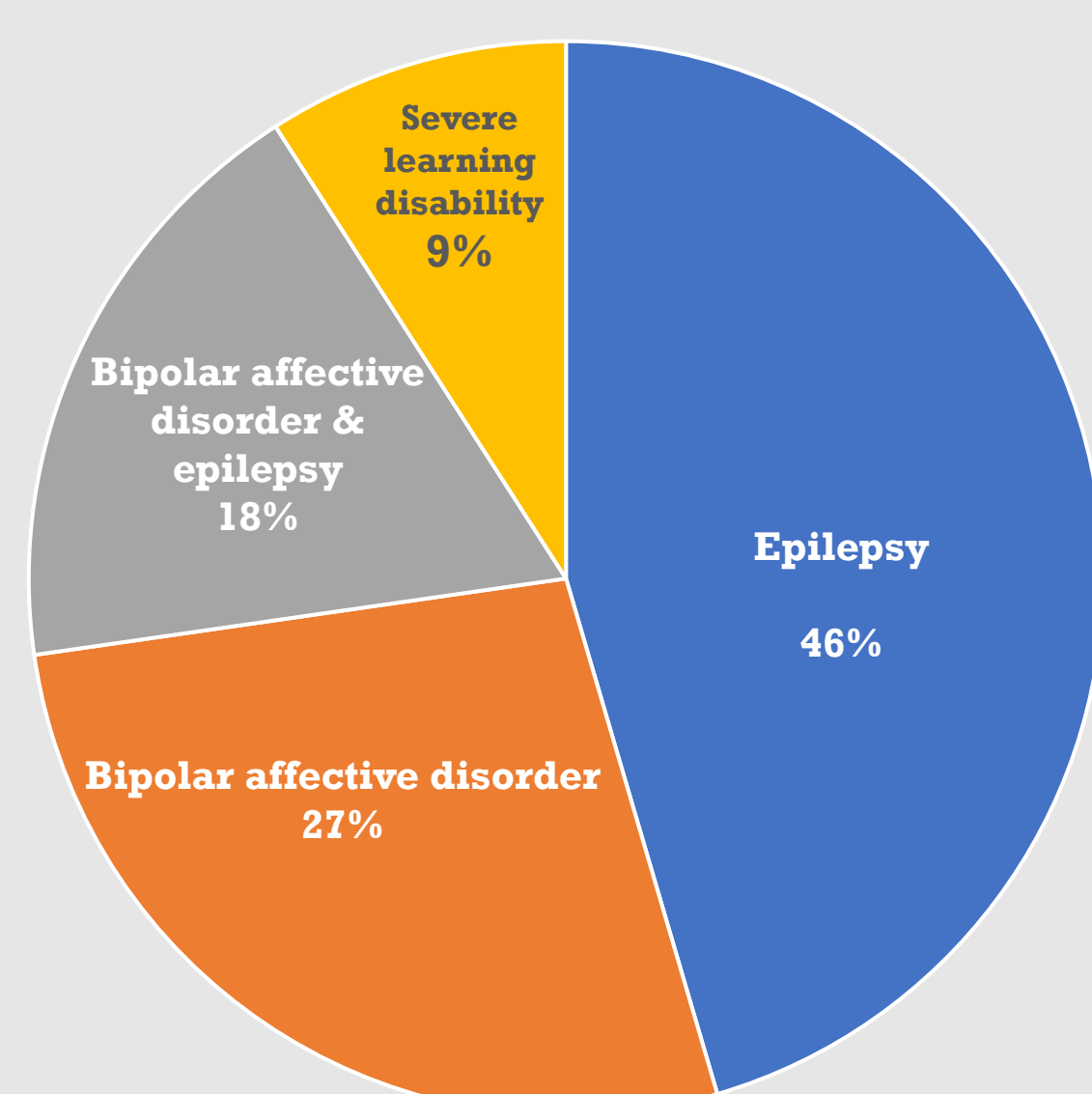


Methods

- Patient records from March 2020 to March 2023 were reviewed.
- The team identified females in the childbearing period who were prescribed Sodium Valproate within the Bolton Learning Disability team.
- The audit assessed Capacity form completion, Annual Risk form completion and the indications for the prescription of Sodium Valproate

Results

- Eleven patients met the criteria of being female in the childbearing period under the learning disability team in Bolton and were prescribed sodium valproate. Among them, six were prescribed the medication by the LD team and five by the neurology team.
- Indications of prescription included epilepsy (46%), bipolar affective disorder (27%), combined conditions (18%), and severe learning disability (9%).

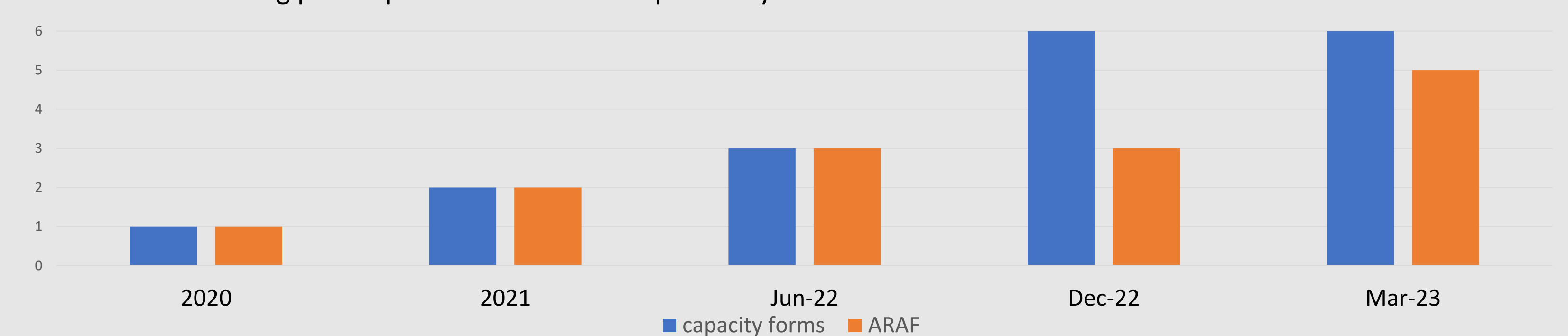


Figure(1) : Graph shows the indication of Sodium valproate prescription in Female in Childbearing potential within Bolton LD team

- All patients identified lacked the capacity to make informal decisions around the prescription of Sodium Valproate.
- Over the study period, Capacity and Annual Risk assessment form completion rates increased remarkably. In 2020, completion was 14%, rising to 25% in 2021 and 42% in June 2022.
- By March 2023, of the six patients prescribed the medication by the Bolton LD team. 100% capacity form completion was achieved, and the completion rate for annual risk assessment forms reached 83% (5/6), as One patient did not attend the clinic review for annual risk form completion.

	2020	2021	June 2022	December 2022	March 2023
Prescribed by Bolton LD team	7	8	7	6	6
Capacity form completed	1 (14%)	2(25%)	3 (42%)	6 (100%)	6 (100%)
ARAF Completed	1 (14%)	2 (25%)	3 (42%)	3 (50 %)	5 (83%)

Figure(2) : Table shows the Numbers and percentages of the ARAF and Capacity Forms completed over the study period in Female in Childbearing period prescribed sodium valproate by Bolton LD team



Figure(3) : Graph shows the numbers of the ARAF and Capacity Forms completed over the study period

- However, concerns emerged as four of the five patients prescribed sodium valproate by the neurology team lacked completed forms in our records.

Conclusion

- Since the project started in 2020, our main obstacle has been ensuring the thorough comprehension and signing of required forms by families and caregivers for incapacitated patients.
- The shift to remote clinical reviews during the COVID-19 pandemic exacerbated these challenges.
- Despite these hurdles, the LD team displayed commendable performance, achieving a 100% compliance rate with capacity forms, hence capacity forms completed by clinicians.
- The most significant challenge arose from the ARAF completion, which required the active participation of caregivers or families.
- In addressing this, strategies such as sending out ARAF forms by post in June 2022 and organising a face-to-face clinic in December 2022 were implemented.
- As a result, we observed a rise in compliance, moving from an initial 42% to a commendable 83% compliance with the ARAF.
- This surge in compliance indicates the effectiveness of the above interventions and leads to increased adherence to national guidelines and GMMH Trust policies for valproate prescription safety.