Enhancing Medication Experience in Children under Paediatric Nephrology – The MedsEasy Programme



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MedsEasy Programme - Pill School



- Why this programme?
 - Liquid medications are inconvenient, contain unwanted excipients
 - Age-appropriate formulations are not available for many drugs leading to the need of crushing tablets
 - Impact on Compliance
- Aim
 - To empower young patients with the skills to swallow tablets
- Review of the pilot service from August 2024 February 2025
 - Led by clinical pharmacists, renal nurses, clinicians





Target Patients



- Patients aged 5 years and above who have problem in medication swallowing
 - Currently taking liquid preparation(s), with regime suitable for oral solid dosage form conversion, as assessed by clinical pharmacist;
 - Crushed tablets or opened capsules for administrating their oral medications
- Exclusion criteria:
 - Medical contraindications for medication swallowing
 - Visual/ hearing impairment
 - Severe developmental delay
 - Maintained solely on enteral tube feeding

What we need...













Candies



Logistics of MedsEasy Programme

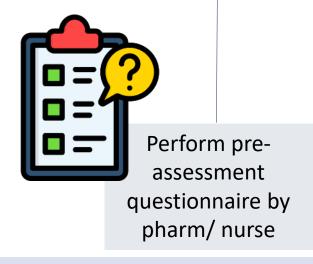
Identify suitable patients





- Monitor Progress (Phone/ Clinic/ Inpatient)
- Follow-up sessions as required
- Post-assessment
- Reward gifts







- Trial switch from liquid to tablet/ capsule
- Reward stickers



Patient Demographics

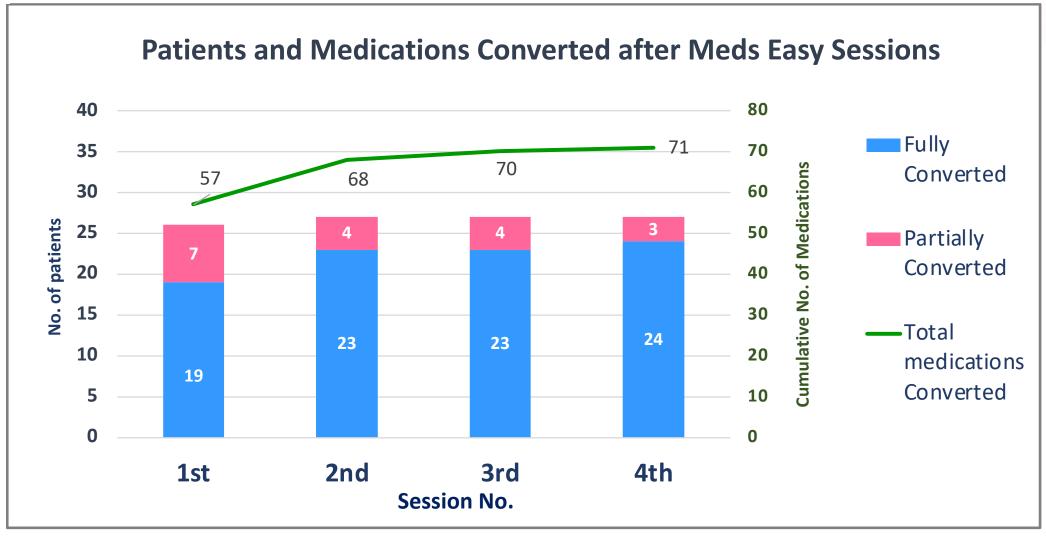


Parameter	Value
Number of patients (n, %)	29
Gender (n, %)	
Male	14 (48.3%)
Female	15 (51.7%)
Age (years), median (IQR)	8.7 (6.4, 10.3)
5 – 8 years	18 (62.1%)
9 – 16 years	11 (37.9%)
Primary disease diagnosis (n, %)	
CAKUT	1 (3.4%)
Glomerular disease	11 (37.9%)
Hereditary/ familial nephropathy	7 (24.1%)
Miscellaneous	10 (34.5%)

Number of active medications per patient (Median, IQR)	3 (1, 4)
Type of active medications	
Liquid medications	64 (76.2%)
Crushed tablets or Opened capsules	20 (23.8%)
Active medications targeted for conversion (n, %)	84
Antihypertensives	17 (20.2%)
Antimicrobials	3 (3.6%)
Gastrointestinal agents	12 (14.3%)
Immunosuppressants	25 (29.8%)
Others	27 (32.1%)
IQR = interquartile range	

Period: August 2024 to February 2025 (N=29)





Medications switched and the corresponding annual cost-savings

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Mycophenolate mofetil 250mg capsule (Cellcept, Micocept) 8 (11.3%) \$215,427 (43.2%) Valganciclovir 450mg tablet 1 (1.4%) \$160,888 (32.3%) Famotidine 20mg tablet 10 (14.1%) \$55,618 (11.2%) Tacrolimus 0.5mg, 1mg capsule (Prograf, Sandoz) 5 (7%) \$15,394 (3.1%) Amlodipine 5mg tablet 6 (8.5%) \$13,912 (2.8%)	ost-
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Amlodipine 5mg tablet 6 (8.5%) \$13,912 (2.8%)	
Prednisolone 1mg, 5mg tablet 7 (9.9%) \$7,810 (1.6%)	
Others 34 (47.9%) \$29,634 (5.9%)	
Total 71 \$498,684	

Period: August 2024 to February 2025





- **29** children recruited
- 27 children converted (93%)
- **5** years old youngest
- **38** sessions delivered
- **71** medicines converted
- **0.5M** projected drug cost savings in one year
- **90%** and above patients and caregivers satisfied with the outcomes



