The two main themes were further divided into subthemes of the Multi-Incident Analysis (Table 2 and Table 3).

### Methods

- Reports of medication incidents involving "Methadone" and/or "Metadol®" were extracted from the CPhIR Program between April 2010 and August 2012.
- 72 incidents met inclusion criteria and were included in this qualitative, multi-theme analysis.
- The incidents were reviewed independently by two ISMP Canada analysts.

### Results

- The majority of the incidents were related to oral methadone used for opioid addiction, that is, the methadone maintenance treatment (MMT) program.
- The 72 medication incidents were categorized into two main themes (Table 1):
  1. Characteristics unique to methadone; and
  2. Medication-use processes.
- The two main themes were further divided into subthemes of contributing factors (Table 2 and Table 3).

### Conclusions

- Learning from medication incidents is a fundamental step to medication system improvement.
- The results of this multi-incident analysis are intended to educate health care professionals about the vulnerabilities within our healthcare system.
- Preventing methadone-related medication incidents requires a strong relationship between the prescriber, the pharmacist, and the patient. The ideal model for MMT is one which allows the 3-way integration of patient, pharmacist, and physician within the community to ensure availability and accessibility of MMT for patients requiring such care. Patients are often the liaison between prescribers and pharmacists. If possible, patients should be included in the discussions to facilitate communication of methadone dose changes or therapy adjustments.

### References