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Population vs. Individualized Models

What is the difference?



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Within DoseMeRx, there are two types of model-based dosing recommendations – a **Population-Model Based Dose** and the **Default Individualized Target** dose (i.e., the **Bayesian Individualized Dose)**. Both dosing recommendations are informed by the pharmacokinetic model that you have selected.

The **Population-Model Based Dose**, is the recommendation that is displayed in the absence of a drug level. In this case, the dosing regimen that is recommended is adjusted based on the patient's demographics (e.g. height, weight, sex, and age) and renal function, but assumes that your patient's pharmacokinetics are similar to the population model. If your patient's pharmacokinetics are not similar to the patient population used to develop the model, it may result in doses that are too high, or too low initially. In these cases, the guideline dose may be more appropriate to use until drug levels can be obtained.

However, once a drug level is obtained, the model is "fitted" using Bayesian science to produce an individualized dose recommendation. In DoseMeRx, this is referred to as the **Default Individualized Target (Individualized Dose)**. This new individual model is then used to provide a patient-specific dosing recommendation to reach the desired therapeutic target.

Helpful FAQs

For more information, check out these DoseMeRx Help documents.

Initial dosing using the Population model

• How does DoseMeRx "learn" over time?

Did this answer your question?









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