

Concept of a pilot study on the feasibility and impact of a pharmacist-led interview with polymedicated older patients



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Introduction:

Aging population often leads to polypharmacy. Consequently, potential drug-related problems and poor coping with therapy become more frequent.

The community pharmacist is one of the healthcare professionals who is able to detect poor adherence and to improve it through patient empowerment in the form of an interview focused on the daily treatment and the patient's acceptance. His role becomes more important with polymedicated patients as he can review their therapy for drug-related problems.

Objectives:

1. To evaluate the feasibility of an intermediate medication review
2. To evaluate the effectiveness of this intervention

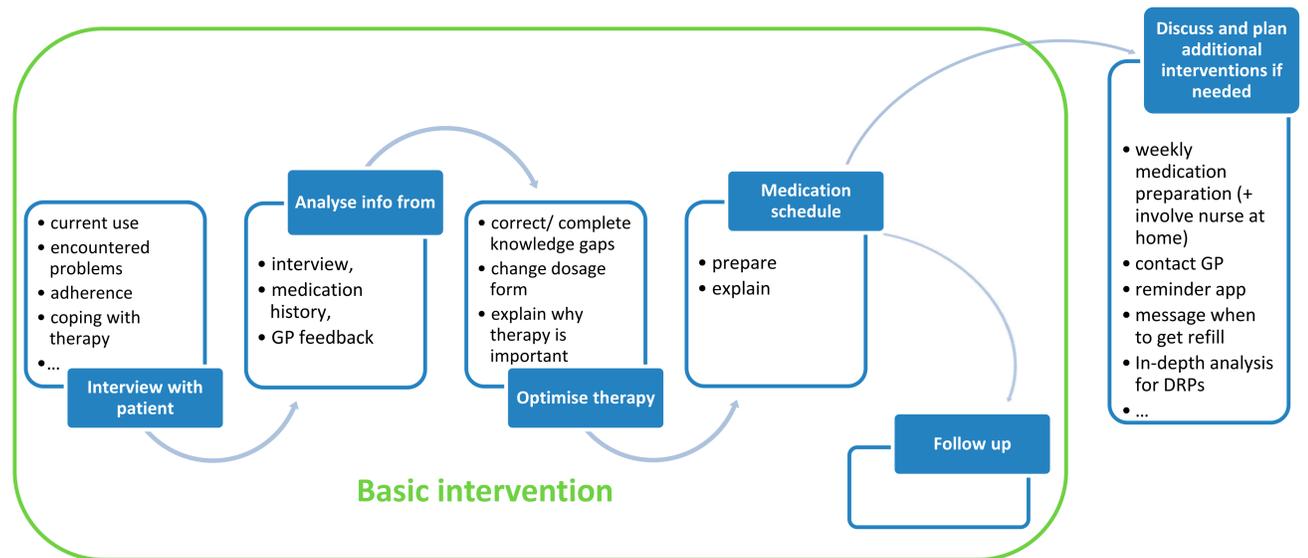
Methods:

Potential drug-related problems (DRPs), including non-adherence, can be identified and resolved by means of a **structured interview with the patient**. The key factor lies in **adjusting advice** and promoting solutions based on the individual patient feedback.

In the third quarter of 2016, 75 community pharmacies will conduct a pilot study to measure feasibility and impact of this approach. During the interview, they aim to collect the necessary information to be able to carry out a risk analysis on the correct use of medicines. This will be followed by in-depth counselling focused on:

- filling in **knowledge gaps**
- **empowering** the patient (making him more confident and at ease with his therapy)
- in case of detected problems: practical and **tailored solutions** such as:
 - weekly medication preparation
 - tools or tips for reminders (app, message, fixed moment during the day)
 - a second interview
 - advice to the GP: changing dosage form, interactions, side effects, cheaper alternatives,...
 - structured analysis of DRPs
 - others...

The overall view on the patient's medication creates an opportunity to discover DRPs. In a subset of patients, a new and validated tool will be used for that purpose: **GheOP³S** tool. This Belgian tool was developed for systematic and explicit screening on relevant DRPs in the typical community pharmacy practice [1].

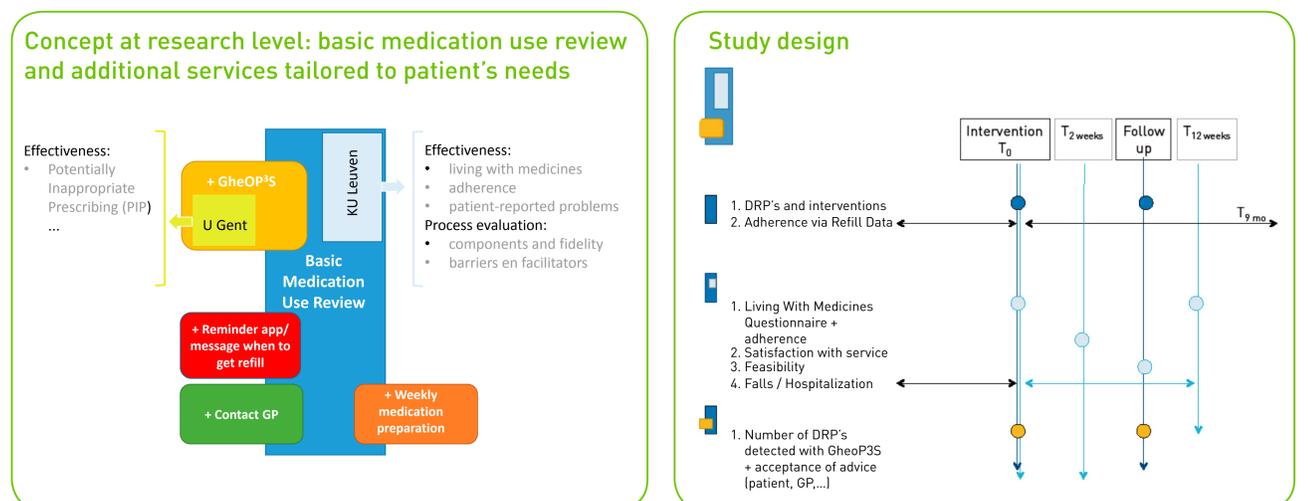


Results:

- At patient level:
 - a better understanding of their therapy
 - an up-to-date **medication schedule**, preferably discussed with the GP
- At research level:
 - basic medication use review -> impact on patient-related outcome measures
 - when the GheOP³S-tool is performed -> medication appropriateness
 - adherence, as measured by prescription refill data and as reported by the patient
 - feasibility of the protocol

Study design:

The universities of Leuven and Gent will monitor impact and feasibility in a cohort study design.



Conclusions:

Despite the care provided by Belgian healthcare professionals, patients with multiple chronic diseases still drop out of therapy. Since there is some evidence available that a structured pharmacist intervention leads to effective and cost-effective improvement of therapy and therapy adherence [2], we want to investigate the feasibility and impact of such an interview in Belgian community pharmacies.

References:

- [1] Tommelein E. et al. Older Patients' Prescriptions Screening in the Community Pharmacy: Development of the Ghent Older People's Prescriptions Community Pharmacy Screening (GheOP³S) Tool. Journal of Public Health 2015.
- [2] Hattah E. et al. A systematic review and meta-analysis of pharmacist-led fee-for-services medication review. Br J Clin Pharmacol. 2014.