

Community Pharmacist: Making an impact on stroke prevention

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Introduction

Advances in clinical practice and development of new agents known as Non-vitamin K antagonist Oral Anticoagulants (NOACs) have reformed stroke prevention in atrial fibrillation (AF)¹. Adherence to oral anticoagulants is a challenge no different to any other therapy of long term conditions (LTC), with evidence demonstrating a third to half of patients are more likely to stop taking their medicine².

New Medicine Service (NMS) is a nationally commissioned service available from community pharmacies to support adherence. It has been shown to improve this by 10% in patients newly initiated on medications for LTCs including oral anticoagulants. These agents make up the smallest proportion of all the NMS consultations. Community pharmacists require skills and knowledge when addressing individual patients' needs and facilitating interventions³.

Aim

Assess community pharmacist knowledge, confidence in supporting patients' adherence as part of NMS on oral anticoagulant for stroke prevention in patients with AF.

Method

A cross-sectional online survey was designed, piloted and sent to community pharmacists in London from 4th December 2014 to 31st January 2015. Statistical analysis of the data was performed and a p<0.05 is considered statistically significant.

Results

269 responses were received, of which 12 were excluded due to incomplete data. Response bias was not considered as the representative sample of 257 respondent pharmacists were from London (figure 1), with a variety in their demographic characterisation (table 1). 68% (174/257) of responding pharmacists completed one or more NMS consultations for all anticoagulants of which 52% (91/174) were for NOACs.

Figure 1. Number of survey responses from London areas.

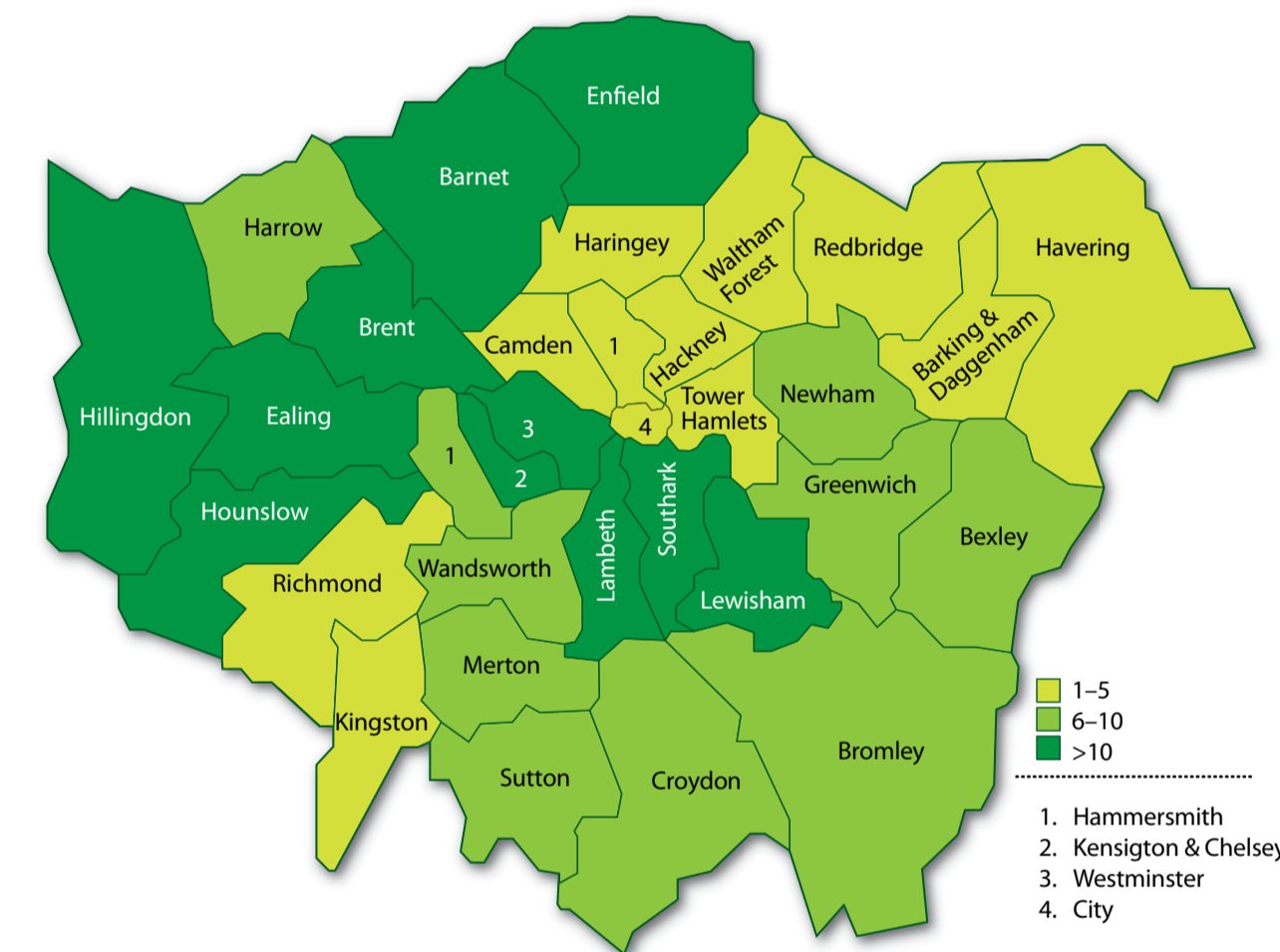


Table 1. Demographics of respondents (n=257)

Characteristic	Respondents
Male	62% (159)
Average years of practice as community pharmacist	21 (1 to 50)
Pharmacist Responding to survey:	
Proprietor pharmacist	39% (99)
Permanent full time employee pharmacist	42% (109)
Permanent part time employee pharmacist	5% (14)
Full time locum pharmacist	11% (28)
Part time locum pharmacist	3% (7)
Further education post pharmacist registration:	
Post graduate diploma	11% (28)
Postgraduate certificate	1% (2)
Masters Level	17% (44)
Doctorate	0% (1)
Independent prescriber	3% (7)
Pharmacist With Special Interest (PWSI): anticoagulation	0% (1)
Other	3% (8)
None	65% (166)

Responding pharmacists revealed they were more confident in their experience and skills in dealing with NMS consultations for vitamin K antagonists than NOACs (p=0.01). Their confidence and knowledge is highlighted in figures 2 and 3.

51% (131/257) of the responding pharmacist confirmed they utilised a resource during an NMS and these are highlighted in figure 4.

Figure 2. Responding pharmacists' confidence and experience with NOACs

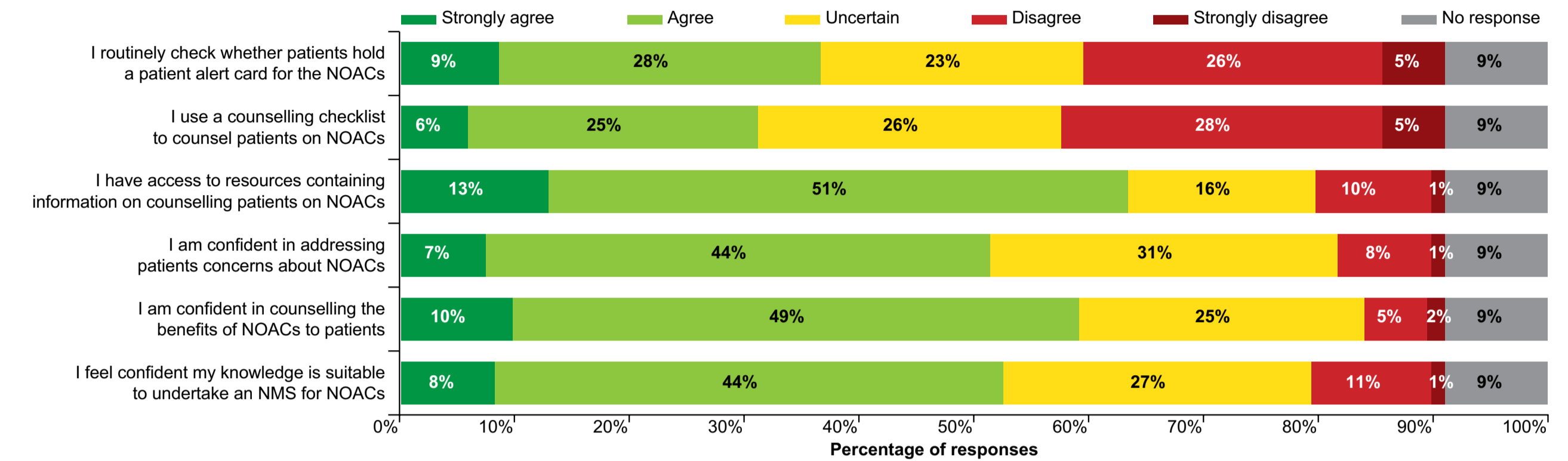


Figure 3. Responding pharmacists' confidence and experience with vitamin K antagonists

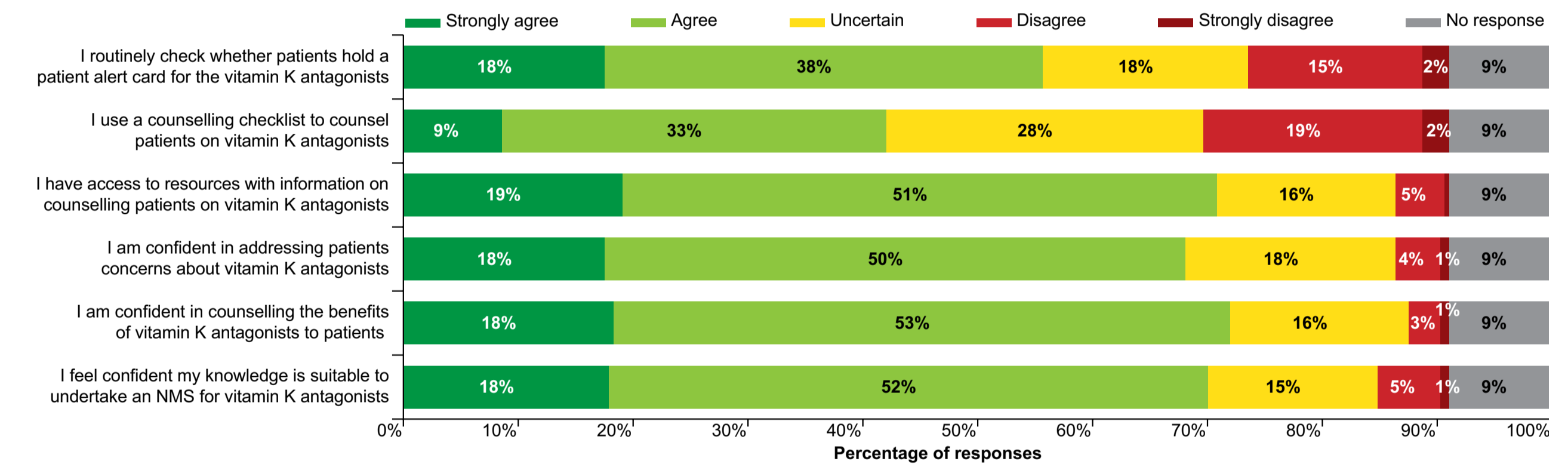
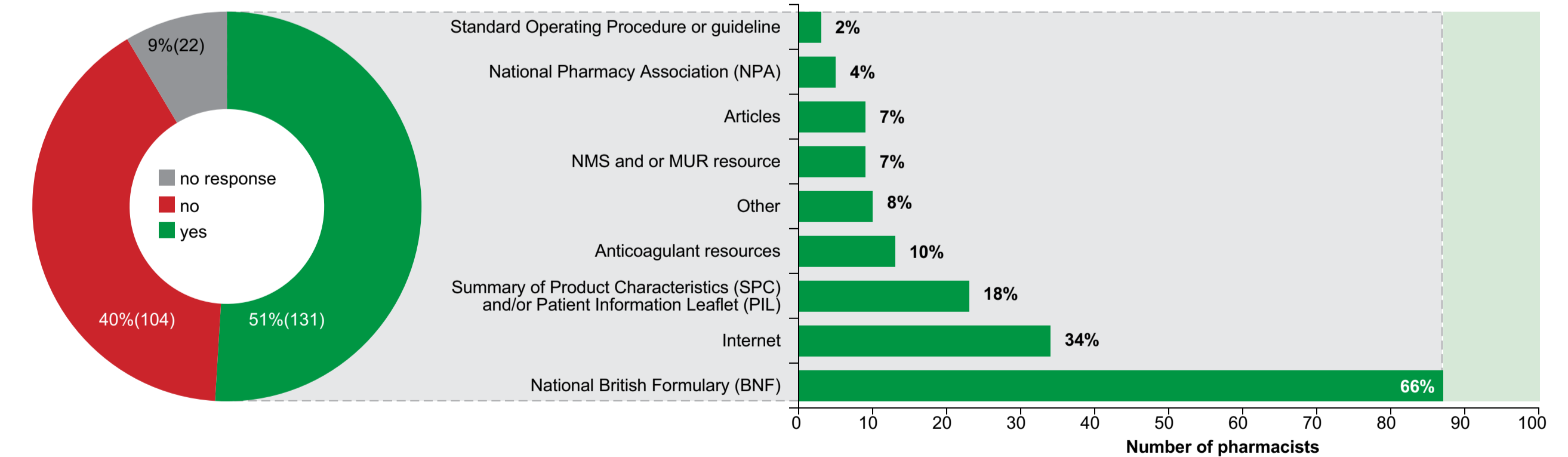


Figure 4. Number of responding pharmacists who referred to a resource during their NMS consultation with details of the types of resources accessed.



Discussion/Conclusion

The findings of this survey suggest there is an opportunity for supporting pharmacists with knowledge and resources to improve their confidence in providing effective consultations to patients' newly prescribed oral anticoagulants. This will require a standard competency training programme and development of appropriate reference toolkits.

References

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