



27th July 2012

On the eve of World Hepatitis Day (28 July) the European Association of Hospital Pharmacists (EAHP) has called on national Governments put in place comprehensive strategies that ensure patients with chronic infectious diseases are able to manage their condition and receive continuity of care. Central to this is utilising the role of the hospital pharmacist in medicines reconciliation and ensuring systems encourage seamless care between sectors.

In terms of self-management, many patients with hepatitis have a chronic disease which means drug treatment will not cure their condition and they must continue taking medicines until the end of their life. During these long-term therapies a resistance to the medication can often develop, so the patient has to switch to another drug. Other medication management challenges include potential polypharmacy, adherence difficulties and the reconciliation of side effects. As the hospital's resident expert in medicines numerous studies have illustrated the positive and cost-effective role hospital pharmacist play by empowering patients with relevant information, checking the appropriateness of prescribing, and screening for potential drug-drug interactions.

As the typical hepatitis patient is likely to receive care and medication intervention in both the community and secondary care sector, there is also a need to ensure systems encourage health professionals in different settings to communicate and cooperate with each other as part of multi-discipline teams. This requires policy attention to aspects of health professional education, professional standards and interoperable IT.

EAHP Vice-President Tajda Miharija Gala said:

“World Hepatitis Day is a good time to reflect on what more health systems in Europe can do to improve the experience and outcomes achieved for patients living with this all-too-prevalent yet under-discussed class of conditions. Certainly from EAHP's perspective, and with the willingness of policy makers, two very achievable advances could be made: improving medicines management through more routine use of the hospital pharmacist in reconciliation

with the patient; and ensuring all parts of the health service are working as one in terms of the care provided to patients with conditions like hepatitis.

“The shared professional responsibility for improving patient outcomes is the theme of EAHP’s International Congress in March 2013 and between now and then we will be announcing a number of collaborative initiatives with other stakeholders designed to highlight and take forward thinking on this key health system challenge.”

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For further information please contact [info\[at\]eahp\[dot\]eu](mailto:info@eahp.eu) <sup>[1]</sup>

## NOTES TO EDITORS:

1. EAHP is an association of national organisations representing hospital pharmacists at European and international levels. More information about the EAHP and its history [here](#) <sup>[2]</sup>.

2. World Hepatitis Day (28 July) is an annual event that each year provides international focus for patient groups and people living with hepatitis B and C. It is an opportunity around which interested groups can raise awareness and influence real change in disease prevention and access to testing and treatment. More information [here](#) <sup>[3]</sup>.

3. Literature supporting the positive role that hospital pharmacists can make in medicine reconciliation, including preventing adverse drug events, improving medicines adherence and improving outcomes include:

Schnipper JL, Kirwin JL, Cotugno MC, et al. Role of pharmacist counseling in preventing adverse drug events after hospitalization. Arch Intern Med. 2006;166:565-571

Hellström LM, Bondesson A, Höglund P, Midlöv P, Holmdahl L, Rickhag E, Eriksson T. Impact of the Lund Integrated Medicines Management (LIMM) model on medication appropriateness and drug-related hospital revisits. Eur J Clin Pharmacol. 2011 Jul;67(7):741-52. Epub 2011 Feb 12

Schumock GT, Butler MG, Meek PD, et al. Evidence of the economic benefit of clinical pharmacy services: 1996-2000. Pharmacotherapy. 2003;23(1):113-132.

4. Literature supporting the patient benefits of multi-professional working between sectors include:

Chisholm-Burns MA, Kim Lee J, Spivey CA, Slack M, Herrier RN, Hall-Lipsy E, Graff Zivin J, Abraham I, Palmer J, Martin JR, Kramer SS, Wunz T. US pharmacists' effect as team members on patient care: systematic review and meta-analyses. Medical Care. 2010;48(10):923-933.

Kucukarslan SN, Peters M, Mlynarek M, Nafziger DA. Pharmacists on rounding teams reduce preventable adverse drug events in hospital general medicine units. Arch Intern Med. 2003;163:2014-2018.

27 July 2012

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## Links

[1] <https://www.eahp.eu/contact/info/eahp/eu> [2] <http://www.eahp.eu/about-us> [3]

[http://www.who.int/mediacentre/events/annual/world\\_hepatitis\\_day/en/index.html](http://www.who.int/mediacentre/events/annual/world_hepatitis_day/en/index.html)