



PERCEPTION OF HOSPITAL PHARMACIES ABOUT TELEPHARMACY IN THE PROVISION OF HEALTHCARE FOR PEOPLE LIVING WITH HIV

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BACKGROUND AND IMPORTANCE

The aim of telepharmacy (TF) is to maximize the potential of telehealth and transform remote monitoring by hospital pharmacies (HP) into added value to society. This service should be made available preferably to the most vulnerable patients in terms of mobility, geographic distance, economic capacity or work constraints¹.



AIMS AND OBJECTIVES

To get insights about the knowledge of TF by the HP in Portugal with regards to possible benefits and barriers for the implementation of a regulated and funded antiretroviral therapy (ART) Delivery Proximity Programme to people living with the Human Immunodeficiency Virus (PLHIV).

MATERIALS AND METHODS

A quantitative, cross-sectional and analytical study was carried out through application of a previously validated questionnaire to 32 HP in Portugal that provide ART. Outpatient care for HP and their perception of follow-up using TF was characterized. We looked for the statistical association with the dispensing of ART in proximity model and the remote monitoring of PLHIV.

RESULTS

More than two thirds of the HP have opening hours outside regular hours

◎ >90% are opened during lunchtime.

More than half of PLHIV live close to the hospital

>80% have outreach programs that are close to PLHIV

Around 60% have long-distance follow-up for this pathology

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Output All HP have considered an elaboration of a TF regulation manual, and its inclusion in hospital funding

We have found an correlation between the existence of proximity programs to PLHIV and high rurality (p<0.5) and low population density (p<0.5)</p>

The existence of Delivery Proximity Programme to PLHIV has also been associated with adherence to this service (p<0.5)</p>

CONCLUSION AND RELEVANCE

The results of this study suggest that dispensing therapy using a Medicines Delivery Proximity Programme and HP monitoring of patients at a distance through TF enhance the adherence of PLHIV. Work, travel or mobility constraints are minimized and health outcomes are maximized.



REFERENCES AND ACKNOWLEDGMENTS

1- Sociedad Española Farmacia Hospitalaria. Proyecto MAPEX: marco estratégico en telefarmacia, Available from: https://www.sefh.es/mapex/images/Telefarmacia_SEFH.pdf

