IMPACT OF PHARMACEUTICAL CONSULTATION IMPLEMENTATION ON THE PHARMACEUTICAL INTERVENTIONS AND THE ROLE OF PHARMACISTS IN MULTIDISCIPLINARY TEAMS

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BACKGROUND AND IMPORTANCE

Hospital Beatriz Ângelo, Loures, Portugal
Population: 278.000

1500 monthly patient visits for drug dispensation

In the act of Drug Dispensation, Pharmacists are responsible for activities such as:
- Analysing the patient pharmacotherapeutic profile;
- The prescribed drugs dosage;
- The possible interactions between different drugs, natural products/foods;
- Confirming the indication of the prescription;
- Alerting to the possible drug adverse effects.

Pharmaceutical Consultation (PC) was implemented in 2015, allowing pharmacists to specialize on specific pathologies (started with Hepatitis C). Nowadays PC was expanded to:

- HIV
- Oncology
- Neurology
- Biological Drugs
- Ophtalmology

Although drug dispensation is still the main source of PIs, PC plays an increasing role.

MATERIALS AND METHODS

Retrospective analysis of PIs data in the context of outpatient drug dispensation, from January 2017 to August 2020.

AIM AND OBJECTIVES

Characterisation of the PIs performed in outpatient setting as an indicator of the PC implemented.

RESULTS

The PI data shown in figure 1, reveals an increase in the number of PIs over the years, which is mainly due to the implementation of the PC.

From the total of PIs...

64% were about compliance

19% were regarding appointments and lab analysis

4% were related to missing medication prescription

3% were about medication excessive duration, notification of adverse drug reaction and drug interactions

2% for changing doses

1% due to therapeutic duplication and referral to the emergency department

Regarding the specialties, PIs (2017-2020) were distributed as shown, in figure 2 (N=3149):

CONCLUSION AND RELEVANCE

✔As seen previously, the number of PIs has been increasing over time, which is in part justified by the implementation of PCs.

✔Having 96% of PIs been AwM, clearly shows the pharmacists impact as part of multidisciplinary teams, could we contribute to:

- Hospitalization reduction
- Prevention of patient readmission in Emergency Services and/or Speciality Consultation
- Prevention of possible adverse effects

REFERENCES AND/OR ACKNOWLEDGEMENTS

Not applicable