A MEDICATION THERAPY MANAGEMENT PROGRAM FOR CHRONIC PATIENT: ABOUT PATIENT SATISFACTION IN CARDIOLOGY.

V. Ferreira¹, O. Hanafia¹, H. Feyeux², M. Orloff², M. Agullo¹, R. Collomp², C. Boronad¹

¹Centre Hospitalier de Cannes, Pharmacy Department, Cannes, France.
²Hôpital de l’Archet - CHU de Nice, Pharmacy Department, Nice, France.
³Clinique Plein Ciel, Pharmacy Department, Mougins, France.

Author correspondence: v.ferreira@ch-cannes.fr

Background and purpose

The Health System Modernization law recommends better information and support to patients in their health path. In this context, a Medication Therapy Management program called AIPAT was implemented in our hospital.

The aim of this study was to assess patient satisfaction about this program.

Material and methods

Since March 2015, Medication Therapy Management interventions (MTMi) are offered to outgoing patients from cardiology department. These interventions, about 15 minutes and conducted by pharmacist or physician specifically trained, were structured around two educational tools, designed for this program:

- A card game, to help patients to understand therapeutic goals of their drugs.
- A Personalized Medication Schedule (PMS), filled in with the patient, listing their treatments with their therapeutic goals and delivered by hand to patient at the end of the interventions.

Figure 1: Example of cards

Figure 2: Front side of the PMS

Figure 3: Back side of the PMS

Finally, a satisfaction survey, filled in by the patient, was proposed. Data from this survey was collected and analyzed.

Results

Over 15 months 237 MTMi Median age of respondents: 77 years Median of 7 drugs per discharge prescription 208 satisfaction surveys analyzed

This MTMi appears to be:

You have found the messages and information delivered during this MTMi:

The answers to your questions were satisfactory:

You have acquired new knowledge about your pathology and/or your treatment during this MTMi:

The Personalized Medication Schedule seems to be:

In your opinion, will the personalized schedule developed during the MTMi be useful in everyday life?

Results show a very high satisfaction rate and the tools proposed and information provided are very well considered by patients. These results highlight the need to continue and extend this program to other department and/or hospital. An assessment of MTMi benefit, particularly on patient compliance, should subsequently be implemented. Finally, an electronic transposition of the tools such as a "smartphone/tablet" application would be designed in order to make them interactive and to enable patients or healthcare providers to update the Personalized Medication Schedule.

Conclusion

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