

Screening for common medical conditions in community pharmacy settings



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I. Introduction

Chronic non-communicable diseases (CNCD's) have increased significantly over recent years, which has put additional pressures on primary healthcare providers, such as community pharmacists and general practitioners to tackle these growing conditions.

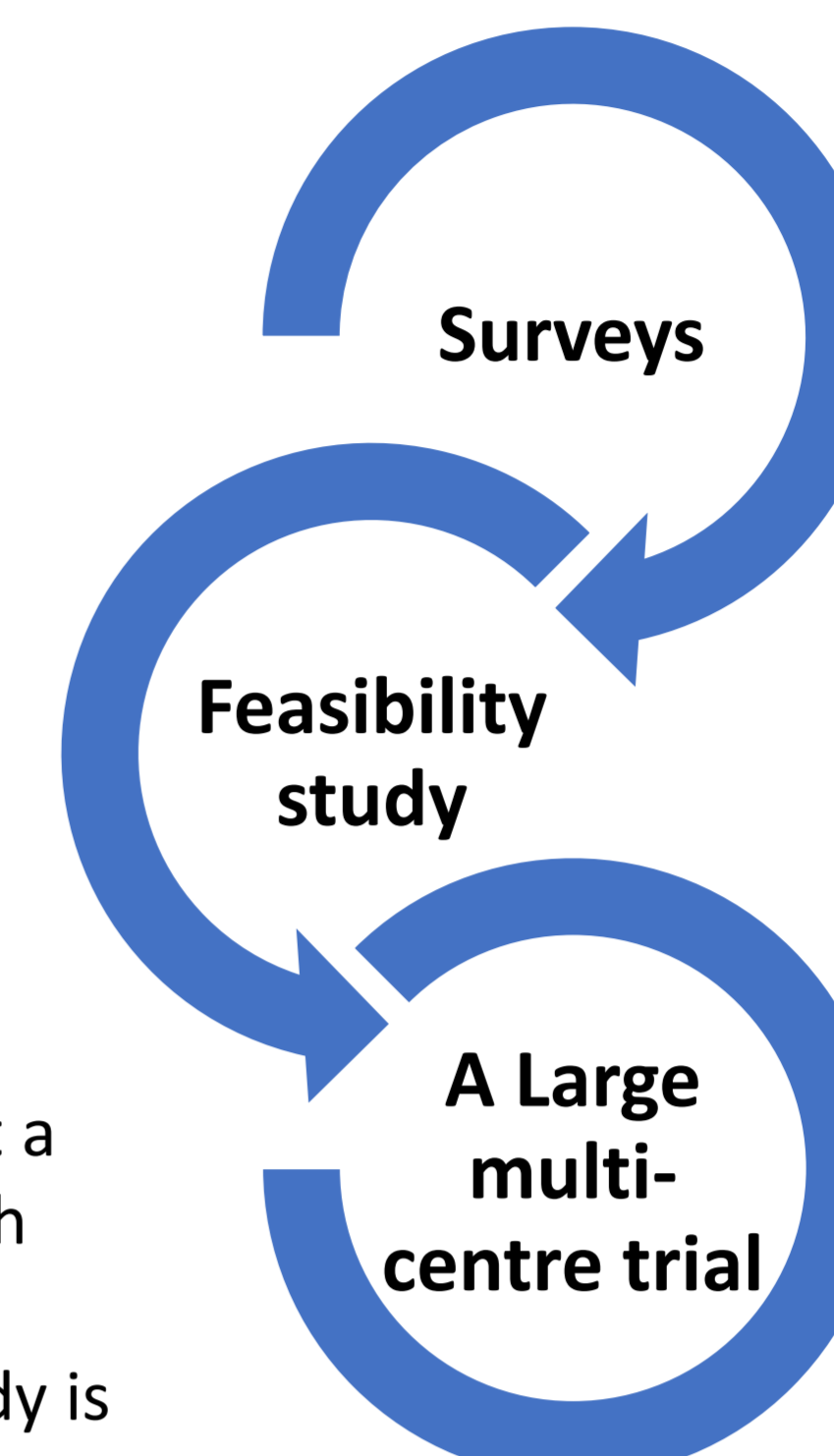
The UK policy and pharmacist's professional bodies have emphasised the potential of community pharmacists to extend their roles in patient care services. Evidence demonstrates a generally wide satisfaction of consumers with services given by pharmacists⁽¹⁾. Current studies show that pharmacists perceive their role in providing health care as very significant, however there is still a large gap between ideal and actual levels of involvement⁽²⁾. Therefore, a deeper understanding of patient's views and pharmacists' views is important for the successful provision of services within community pharmacies such as screening for CNCDs. Such services could have a potential to reduce the NHS' healthcare bill and have cost-saving benefits.

II. Aim

To identify if there is a perceived benefit in target risk based screening of patients in a primary community pharmacy setting.

III. Methods

- Survey questionnaires distributed to members of public, pharmacists and patients attending pharmacies across 4 locations, (London, Birmingham, Coventry & Leicester).
 - A pilot study to establish Feasibility of the service in community pharmacy.
- Preliminary data from the survey and feasibility study will be used to conduct a larger trial as part of collaboration with School of Dentistry, University of Birmingham, where a similar parallel study is being conducted in a dental setting.

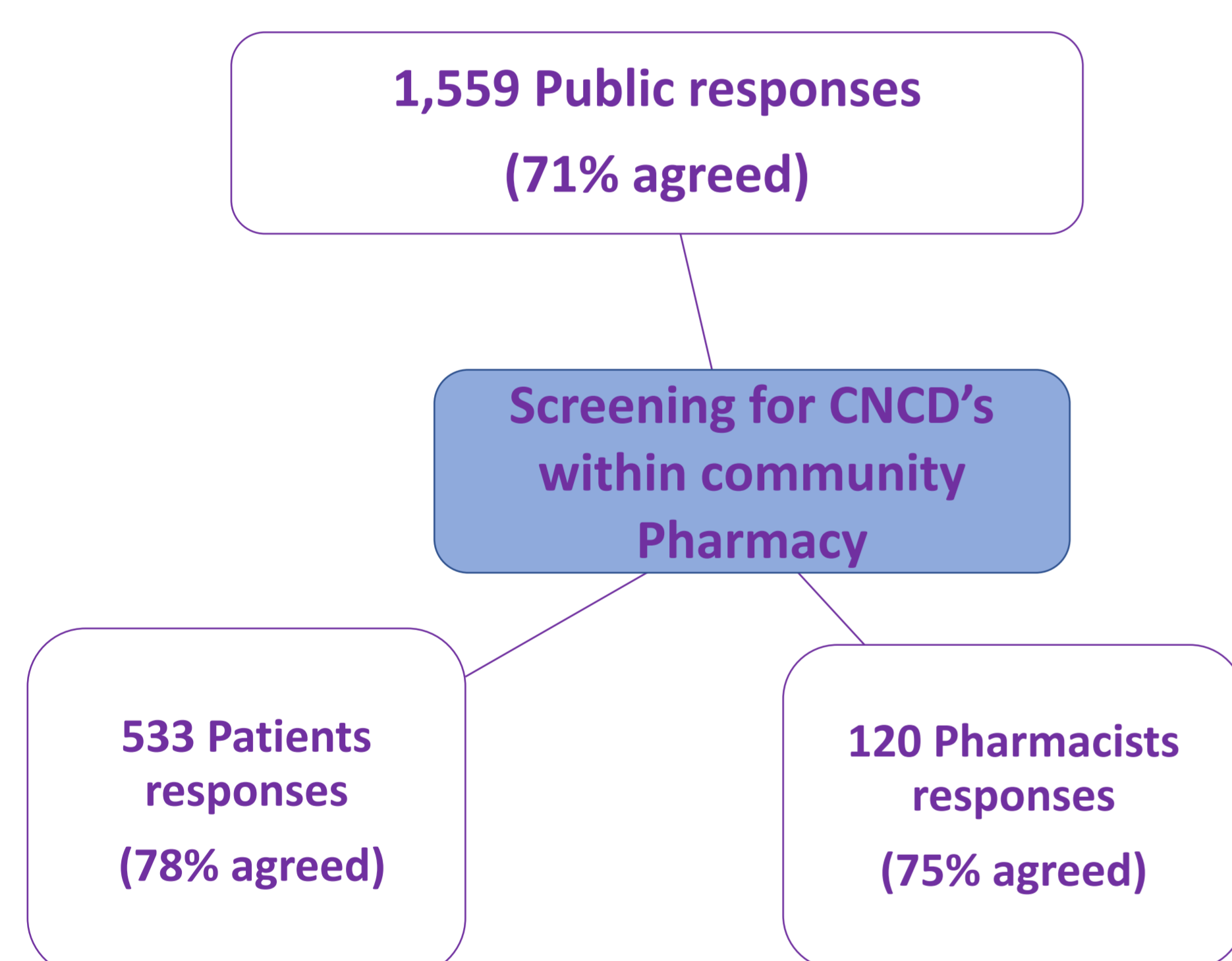


Statistical software to analyse data, (SPSS 22).

IV. Results

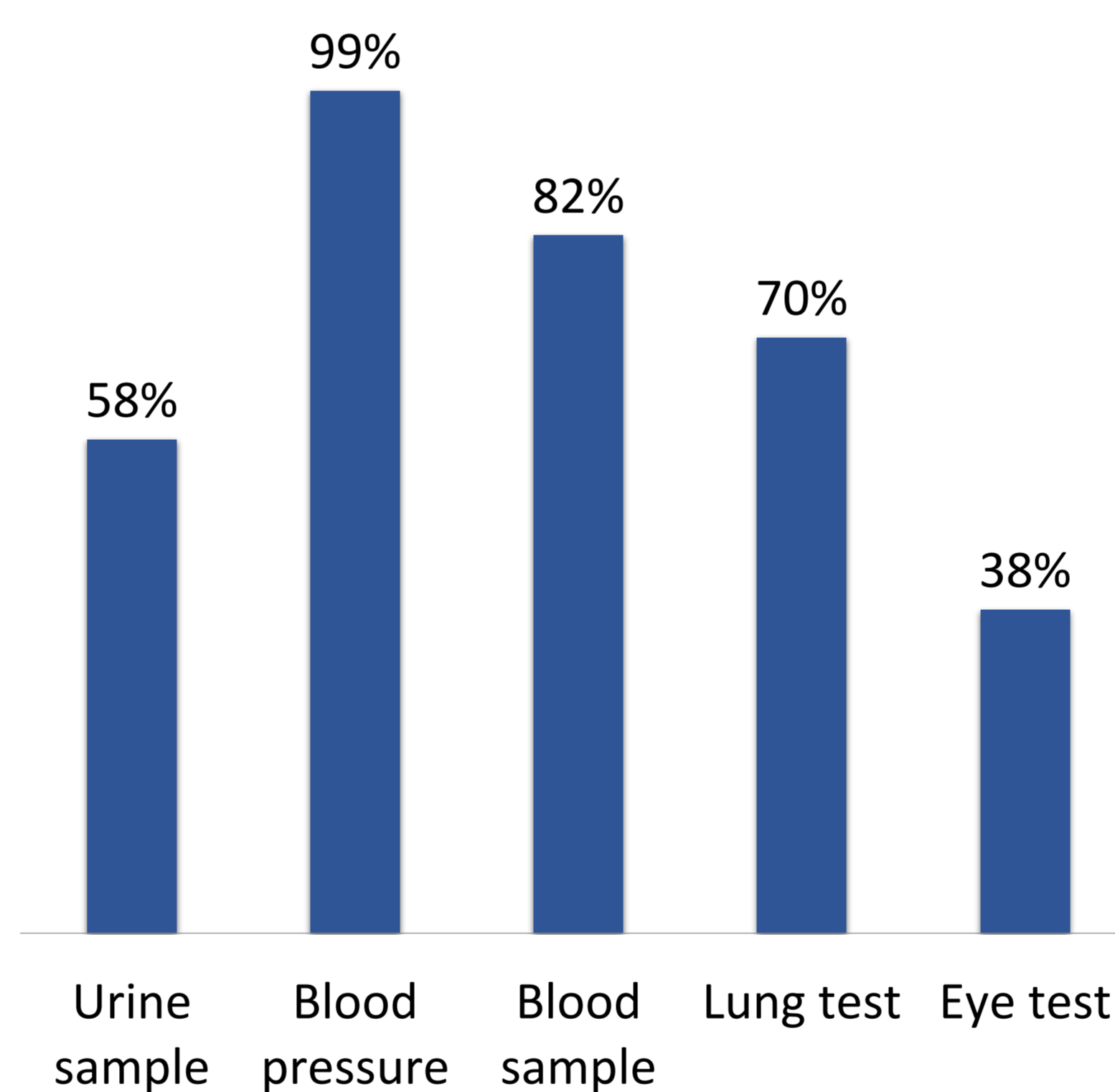
Results from the survey questionnaires:

Figure 1: The percentage of participants who agreed health diseases should be screened for in community pharmacy.



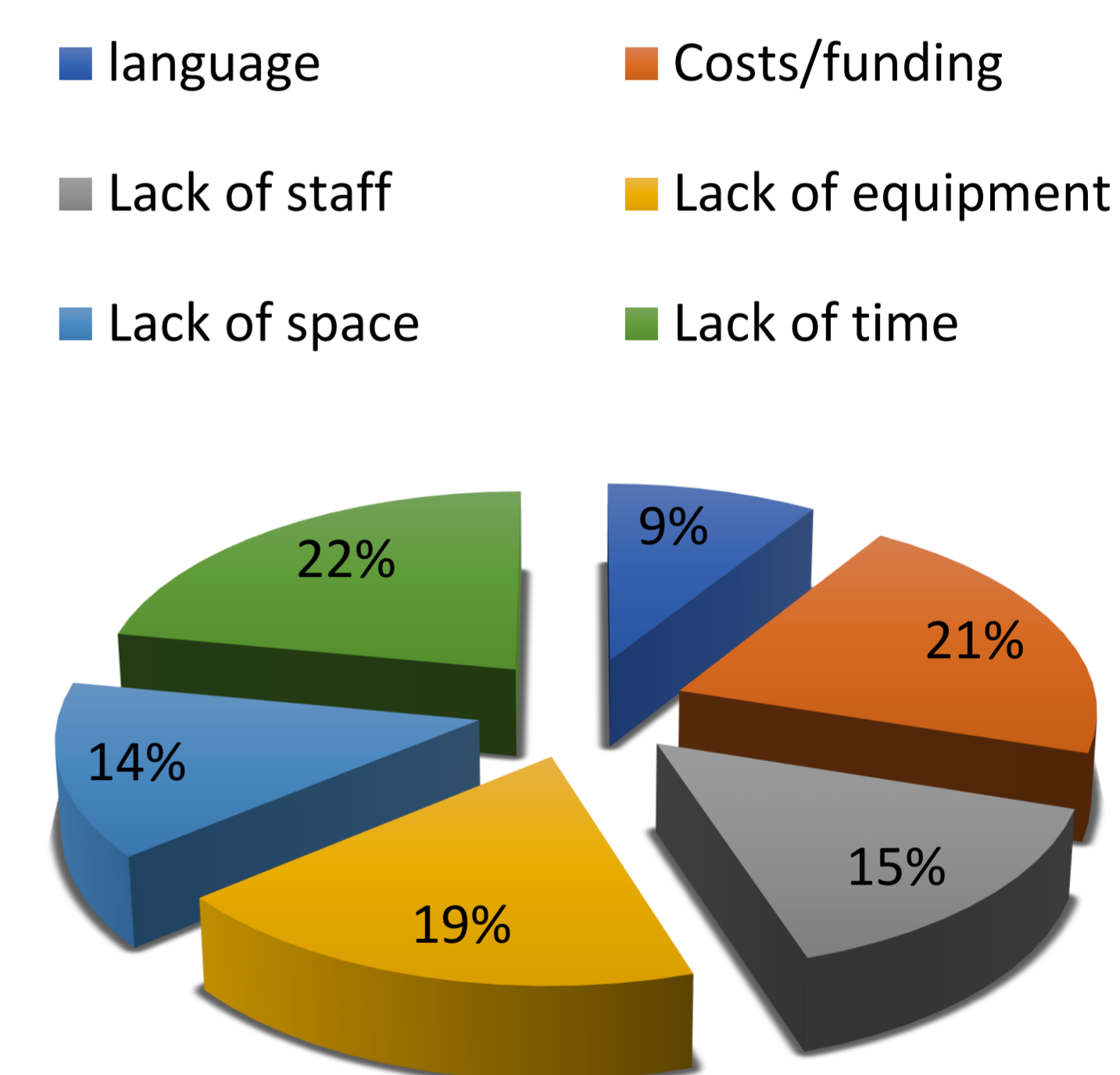
Overall 70% of respondents agreed that a screening service could be of benefit in community pharmacy.

Figure 2: Willingness of pharmacists to perform diagnostic tests for CNCDs in a pharmacy.



Surveys to 120 pharmacists showed that pharmacists were more willing to perform blood pressure and blood sample tests than urine sample and eye tests.

Figure 3: Current barriers pharmacists face when providing health services.



Surveys to 120 pharmacists showed that the two main barriers found, were lack of time (22%) and lack of costs/funding (21%).

V. Discussion

- Preliminary results highlighted the general public and pharmacist acceptance for screening of CNCDs in community pharmacy.
- Other public health initiatives have been previously tested such as healthy living pharmacies (public health related services) and health checks (cardiovascular risk assessment). However, this study is examining a wider range of CNCDs which are: chronic obstructive pulmonary disease, kidney disease, atrial fibrillation, diabetes, hypertension and hypercholesterolemia.
- Conducting a feasibility study could help identify barriers to service development and viability of delivering such services. If successful, these results will need to be tested in a large multicentre study.
- A parallel study is currently being conducted at School of Dentistry, University of Birmingham to investigate similar screening for CNCDs in a dental setting, with an emphasis of highlighting the importance of collaborative care between primary care providers.

References:

1. Eades CE, Ferguson JS and O'Carroll RE. (2011) Public health in community pharmacy: A systematic review of pharmacist and consumer views BMC Public Health, 11:582.
2. Laliberté M-C., Perreault S., Damestoy N. et al. (2012) Ideal and actual involvement of community pharmacists in health promotion and prevention: a cross-sectional study in Quebec, Canada BMC.