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**20th EAFP conference 2014**

**Clinical Pharmacy and Pharmaceutical Care  
research in practice:  
challenges and opportunities**

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## **THE CHALLENGES TO PUT IN PRACTICE THE NEEDS FOR A BETTER PATIENTS CARE**

Schools of pharmacy + Professionals →

→ Are the main force and the real opportunity to change and to improve the pharmacy practice

“Sciences-based pharmacy education towards better medicines and patients care”

“Access to medicines and pharmacists today, better outcomes tomorrow” (FIP-2014)

- With more potent and complex pharmaceutical agents available to the treatment more increases
  - information needs about medicines (doctors and patients)
  - drug related morbidity and mortality
  - rising costs connected with the use of medicines
  - **the responsibilities attributed to the pharmacists.**
- The correct use of medicines significantly decrease
  - untreated health problems
  - the poor outcomes of pharmacotherapy
  - the ineffective and unsafe treatments

Medicines are precious goods and the patients need to learn how to use them

## Looking the past for reflexion the future

- Since 1979 → European Society of Clinical Pharmacy
- **Clinical Pharmacy** as a tool for better use of medicines, better health outcomes and a better use of health care resources.
- In 1990 – Heppler & Strand → Pharmaceutical Care
- **Pharmaceutical Care** is the responsible provision of drug therapy for the purpose of achieving definitive outcomes that improve a patient´s quality of life.
- In 2013 – in Int J Clin Pharm editorial by F.vanMill & F.Llimós

... after 1990

- In 1993 WHO Assembly in Tokyo
  - The members ask for the development of a patient – centered practice in order to the Pharmaceutical Care and recognize and strenghten this concept
- The European Association of Faculties of Pharmacy in 1999 – approve and publish a report from a working group coordinated by Prof Dick Tromp for the theaching and development the pharmaceutical care philosophy.
- Also the World Medical Association in 1999– recognize the responsibilities to the pharmacists.



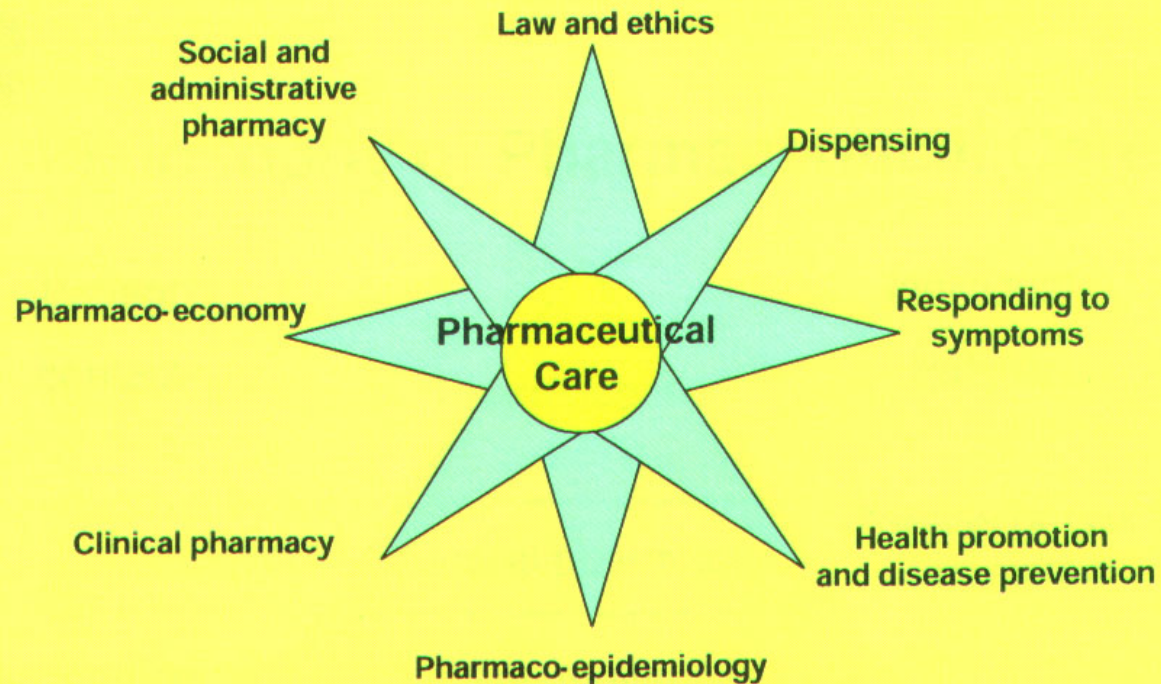
## World Medical Association Statement on the Working Relationship between Physicians and Pharmacists in Medicinal Therapy

Adopted by the 51st World Medical Assembly Tel Aviv, Israel, October 1999  
(...)

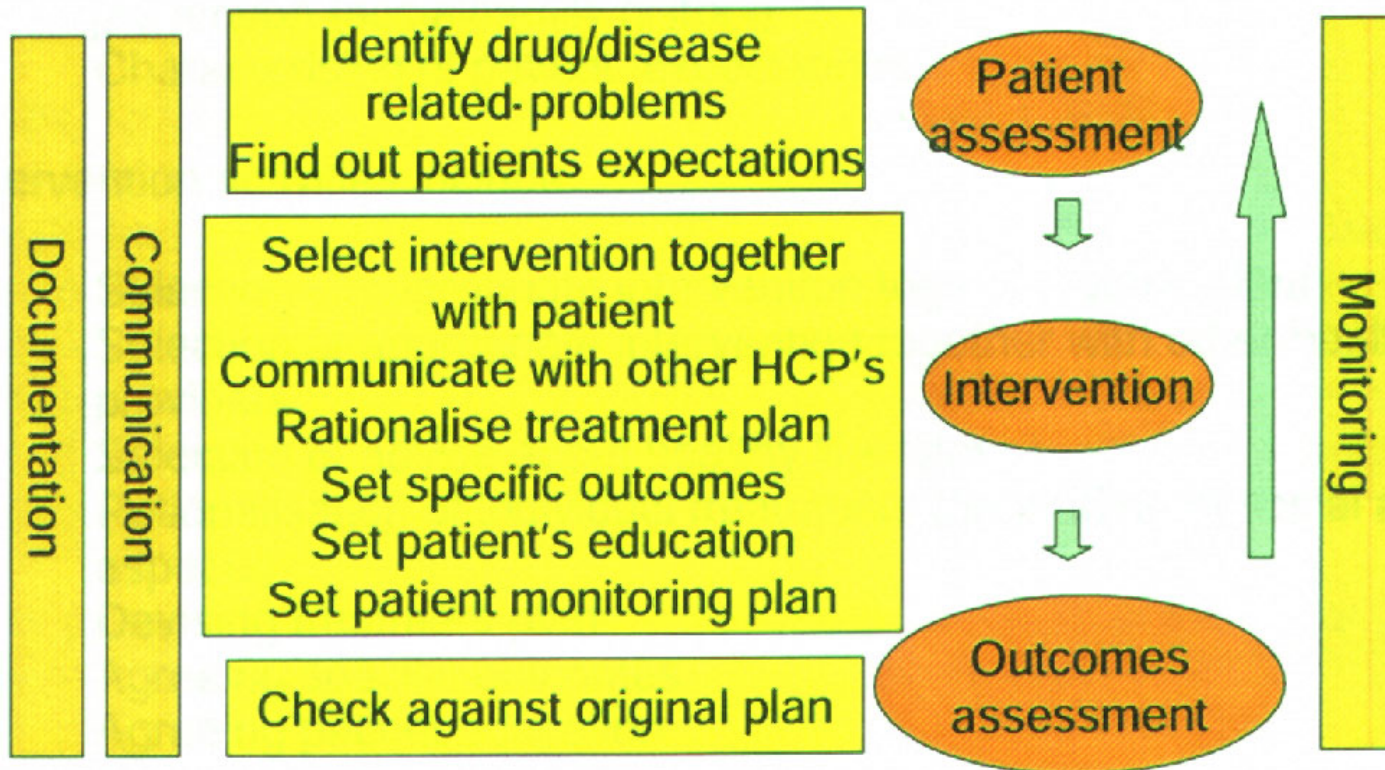
### **c. THE PHARMACIST'S RESPONSIBILITIES** (Only in relation to medicinal therapy)

- 1. Providing information to patients, which may include the name of the medicine, its purpose, potential interactions and side effects as well as correct usage and storage.**
- 2. Reviewing prescription orders to identify interactions, allergic reactions, contra-indications and therapeutic duplications.**
- 3. On request of the patient, discussing medicine-related problems or concerns with regard to the prescribed medicines.**
- 4. Reporting adverse reactions to medicines to health authorities, when appropriate.**
- 5. Maintaining a high level of knowledge about medicinal therapy through continuing professional development.**

## Relation of Pharmaceutical Care to other fields and activities within Pharmacy Practice



# The Pharmaceutical Care process





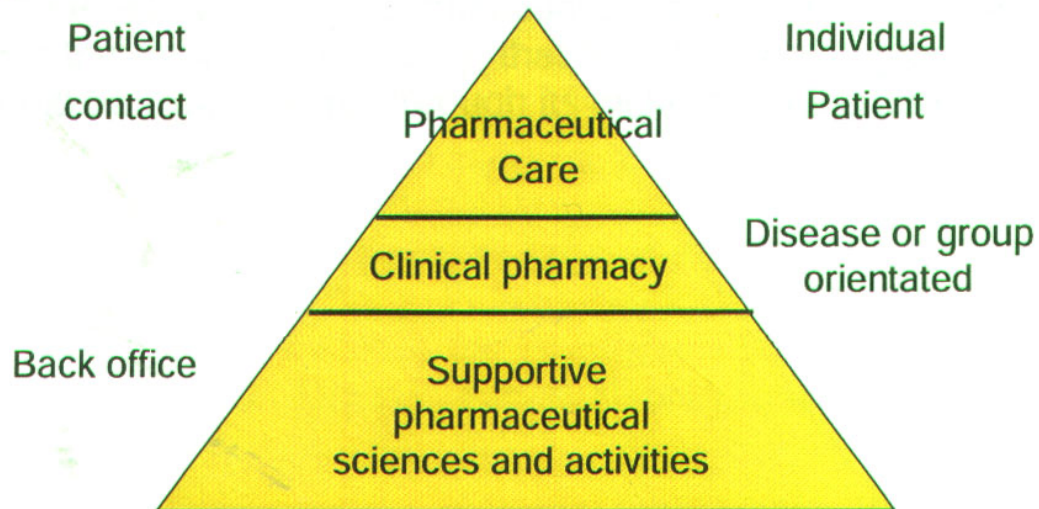
In order to a patient oriented service / or in a perspective of the pharmaceutical care services

- Monitor the process in the use of medicines from a preventive attitude
- Identifying the risk factors in the medicine use process
- Acting within the dispensing in the analysis of the morbidity indicators and in the medication review
- Monitor the outcomes from a reactive attitude
  - Identifying the negative outcomes ( by pharmacotherapy follow-up and disease management).

## 20th EAFP conference – Figure from the Report of EAFP in 1999

- Medicines dispensing Management System
- Orientation to a disease or a group of patients
- Individualized contact with the patient

### Philosophy of Pharmaceutical Care



- **The new competencies for pharmaceutical care**
  - Communication skills
  - Update information for scientific-based decision
  - Individual health critical analysis
  - Ethical behavior
  - Team work and leadership
- **Technical competence and knowledge**
  - Solid training in pharmaceutical sciences (mainly in pathophysiology, pharmacology and pharmacotherapy)
- **Systematize and register the action** in each case



- Communication Skills
- Update Information



- Health Promotion
- Disease Prevention

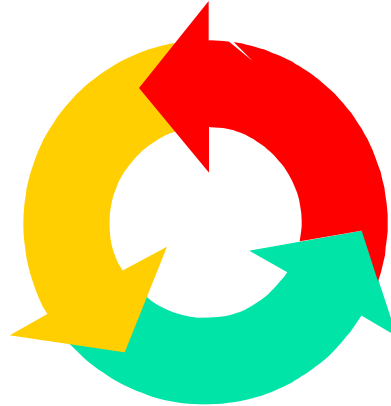
- Programme of disciplines
  - Case studies & practice
- Research examples
  - Quality of life in hypertensive patients
  - Use of medicines in pregnancy
  - Pharmacotherapy in elderly... and others.

### To point out

- When pharmacists and physicians collaborate together, recognizing each other's roles to ensure that medicines are used safely and appropriately to achieve the best health outcomes to the patients.

## Knowledge needs / professional skills

UNIVERSITY



PROFISSION

Research / update attitudes

- *The main barrier to the Pharmacist overcome will be his own mind and beliefs.*
- **But... NEW FLOWING WINDS ARE COMING  
IN THE PHARMACIST DIRECTION  
AND WE NEED BE READY !**

(Thanks to my colleagues IV Figueiredo & Mcastel-Branco)

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*Thanks for  
your  
attention !!!*