NPM: Quality of advice provided in pharmacies and parapharmacies

Beatriz Escarigo Carvalho 1, Filipa Alves da Costa 2.
1Master in Pharmaceutical Sciences Institute of Health Sciences Egas Moniz. 2Assistant Professor, Higher Institute of Health Sciences Egas Moniz. Centre for Interdisciplinary Research Egas Moniz

Background The consumption of non-prescription medicines (NPM) has been increasing, and with it comes the need to guarantee that better counselling are provided in pharmacies and drug stores to ensure the responsible use of medicines. Therefore, it becomes relevant to evaluate the performance of health professionals in these two locations.

Purpose This study aimed to evaluate the quality of advise when dispensing non-prescription medicines (NPM) in pharmacies and drug stores. This evaluation took into account: the quality of the initial patient assessment; the quality of the therapeutic decision (considering effectiveness, safety and necessity); and the quality of transmission of information upon medicine dispensing.

Method A covert observational cross-sectional study was used, through mystery shopping technique. Two scenarios were designed: 1) direct product request of emergency oral contraception (EOC) for own use and 2) direct product request of an NSAID for a grand mother. The two scenarios were designed so that ideally, pharmacists or technicians would identify that the client did not have an indication for EOC, in scenario 1, and the client's grandmother was taking a potentially unsafe drug to be taken together with the NSAID (warfarin), in scenario 2. Two target groups were set: pharmacies (n=30) and drug stores (n=30). The performance of health professionals was measured through an evaluation grid, developed based on the Good Pharmacy Practice National Standards. The results were analysed using the version 24.0 of SPSS for Windows, using Student T test for independent samples and the Mann-Whitney test, considering a 5% significance level.

Findings Looking at the results obtained in the intra-group global performance analysis, it can be seen that the presented scenario did not significantly influence the performance of the evaluated sites. For the emergency oral contraception scenario, a significantly better performance was observed for pharmacies when compared with the drug stores (p <0.05). In the NSAID scenario, pharmacies also performed better, overall and in all sections evaluated, although differences were only significant in the section referring to information provision (p <0.05).

Conclusion This study suggests that the performance in pharmacies is higher than in drug stores, although it is necessary to develop larger studies to confirm these data. Nonetheless, it should be acknowledged that representative organizations must play a more active role in the implementation of counselling protocols that ensure a higher quality of performance.