Detecting non-adherence through a basic medication review during dispensing in community pharmacy: A pilot study.

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**Background** Non-adherence is a public health problem, particularly among chronic patients and those taking several medications. SEFAC has suggested that an intervention based on a basic medication review during the dispensing process will help to identify non-adherence.

**Purpose** To pilot a basic medication review service to assess adherence during the dispensing process that can be applied to all patients taking several medications and integrated into the everyday routine of community pharmacies.

**Method** Cross-sectional study conducted in 18 community pharmacies in Spain. Patients who requested their medication through an electronic prescriptions were selected at random to undergo a quick, anonymous interview. The following data was collected: patient's sociodemographic data, medications available to be dispensed, prescriptions collected and reasons to refuse collecting a prescription, medication actually taken by the patient, and level of knowledge of the medications. The Haynes test was used to measure adherence because of its simplicity.

**Findings** 333 patients participated. Average age was 67 years (SD=13.6), 55% were female. 24% lived alone and 8% needed a care, 93% had a chronic disease 21% took medication for depression and/or cognitive impairment, and 88% of patients were prescribed more than 3 medications. 51% of patients did not collected all the medications available: 59% due to a discrepancy between the verbal and written instructions given by the primary care physician, 31% due to possible non-adherence. Of those who were non-adherent, some had more than one reason for it, depending on the medication. 33% were confused about one of the medications prescribed, 25% did not trust the prescription, and 64% trivialized about one of the treatment. In addition, 25% did not take a medication due to adverse reactions, and 23% did not give any reasons for non-adherence. 20% of the patients who did not collected a prescription changed their attitude as a result of the pharmacist intervention. The average time spent on each interview was 5.5 (SD=3.8) minutes.

**Conclusion** The study shows that performing a basic medication review during the dispensing process enables us to assess patient adherence and identify their reasons for non-adherence. In 1 out of 5 cases, the pharmacist can help the patients to reconsider taking their medication and thus improve adherence.