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 prescription 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 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 collect 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 collect 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.