

Determination of irregular pulse in Spanish community pharmacy, as screening for atrial fibrillation. Project Know your pulse.

Sr Salvador Tous i Trepal 1, Dr. Sebastian Ramon Martinez Perez 2, Rosa Prats Mas 3, Sra Irene Escudero Rivera 4, Sr Baltasar Pons Thomas 5, Patricia Garcia Rodriguez 6.

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Background Atrial fibrillation (AF) is increasingly present among the elderly population. This condition is often asymptomatic and is known to increase 5-fold the risk of stroke, whilst doubling the risk of death.

Purpose The Spanish Society of Family and Community Pharmacy (SEFAC), in collaboration with the Atrial Fibrillation Association and the International Pharmacists on Anti Coagulation Taskforce (IPACT), have launched this pilot study, simultaneously in 4 countries, to assess their effectiveness in the detection of atrial fibrillation, the reduction of its possible consequences and transmission to the general public the importance of arrhythmias and their correct diagnosis and treatment.

Method Cross-sectional descriptive study of diagnostic intervention carried out from 24 to 29 November 2016 by Spanish community pharmacists (CP), in people aged ≥ 65 years without known previous diagnosis of AF or arrhythmia and / or without treatment that allows us to assume a diagnosis that accept to participate. After 5 minutes of rest, the radial pulse was determined during 30s, plus 30s if necessary. People with an irregular pulse completed an evaluation questionnaire: medication, heart problems, etc. and were referred to their doctor. Patients were informed and handed out leaflets about pulse check, AF and its consequences, etc.

Findings 22 CP in 21 community pharmacies. 390 users were offered to participate and 355 accepted (91.0%). 355 pulse determinations were made, of which 19 (5.3% of the total) were irregular and 14 were referred to their doctor (4.0% of the total), 1 did not accept the referral. Five answers were obtained from their doctor through the patient; 3 (60% of the derivatives and 0.9% of the total) confirmed AF and started acenocoumarol; 8 (2.3%) referrals without response. The prevalence of AF observed was between 0.9% (3/355) and 3.7% (13/355), in line with international data from similar studies. Limitations: CPs does not have access to patients' medical records.

Conclusion Community pharmacies are ideally located and easily accessible to transmit health concepts to the population. The participation of community pharmacists in the screening of AF reduces the percentage of unknown AF and improves the quality of their treatment. However, the main conclusion is that full potential can only be reached if coordination with Primary and Specialized Care is ensured.