

Community Pharmacy Intervention in the Evaluation and Prevention of Hypertension and in the Identification of Hypertensive Patients

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Background Despite the increasing improvement in cardiovascular disease (CVD) indicators in Portugal, these remain at the top of the causes of death in Portugal and Europe. Cardiovascular risk factors (CV) can be non-modifiable, such as gender and age, or modifiable, such as arterial hypertension, dyslipidemia, diabetes mellitus, smoking, overweight, physical inactivity and psychosocial factors. Prevention is therefore challenging and must cover all health professionals and the general population.

Purpose To evaluate the importance of the Community Pharmacy in the identification of patients with hypertension and in the intervention for disease prevention and improvement.

Method A campaign for Blood Pressure (BP) Assessment is carried out, for the celebration of the International Day of Hypertension, in nine pharmacies of the same strategic group. Clients over 18 years old, are invited to participate, despite their diagnose. The objectives of the campaign are: ? Discloser of CV risk factors ? Identification of individuals at high and very high risk and assistance in their control A questionnaire is applied, and BP measurement is performed. Pharmacy services are indicated to users with CV risk factors, such as nutrition consultations for participants with obesity and medicine review services for patients taking several medicines. Patients with no diagnose but with abnormal values are invited to come to the pharmacy in the following days for further measurements. Referral to the doctor is used for participants that despite the diagnose, have abnormal values of BP.

Findings The screening has 792 participants, with an average age of 60 years. The average systolic BP is 132mmHg and average diastolic BP 77.7mmHg. Of the total participants, 239 have systolic BP> 140 mmHg and 122 diastolic BP> 89 mmHg. Participants with both systolic BP> 140 and diastolic > 89mmHg are 99. Participants diagnosed with hypertension are 374 and 60 of them have BP> 140 / 89mmHg. Of these, 364 are medicated and have medical follow up. Participants followed in General Medicine are 414 and in Specialty Medicine are 154. Of the 792 participants surveyed, 39 have no diagnosis of hypertension but have BP> 140 / 89mmHg.

Conclusion The CV Risk assessment allowed the identification of patients at CV Risk and their referral to control risk factors. The community pharmacy is therefore a strategic health place for carrying out this type of campaigns, due to the easy access of the population, and it is also a link to the other health services, in monitoring the patient.