

Patients' perception of an interdisciplinary medication management service

Christiane Eickhoff, Uta Mueller, Ann Kathrin Strunz, Maike Petersen, Martin Schulz .

Background Within the project ARMIN, an interdisciplinary medication management was implemented in Germany. The initial intervention consists of a type 3 medication review. During every patient visit in a participating pharmacy or general practice, new medication is checked for potential risks and the medication plan is updated, if needed. Until now, there are no reimbursed cognitive pharmaceutical services implemented nationwide in Germany. Therefore, little is known on the patients' acceptance of such services and their perception of a personal benefit.

Purpose To assess the medication management service in the project ARMIN with a focus on the patients' perception.

Method We conducted an intervention study with an observational period of six months. We aimed to recruit a convenience sample of n=60 patients. Two self-administered patient questionnaires, filled-in by the patient at baseline (36 items) and after 6 months (41 items), were developed to assess patients' characteristics, perceived benefit, and changes as well as satisfaction with the service. Additionally, pharmacists documented the medication and drug-related problems (DRPs). Complexity of the medication was assessed with medication regimen complexity index (MRCI).

Findings Altogether, 79 patients (54% female) were recruited by 17 community pharmacies. Age distribution: <65 years: 30 (37%), 66-75 years: 25 (32%), and >75 years: 23 (28%) patients, respectively. Mean number of 10.1 medications at baseline (median: 9; range: 5-26) with a slight increase during the six months (mean: 10.9). The MRCI did not change significantly over the intervention period (22.1 at baseline versus 23.4 after 6 months). Overall, pharmacists documented 310 DRPs (mean: 3.9 per patient), of which 65.8% (n=204) were solved. Only 24.1% (n=19) of the patients reported that DRPs were identified and solved; these patients received more medications (11.7 versus 9.8) with a higher MRCI (23.7 vs. 21.6, both n.s.). Patients assessed the changes after 6 months overall positively and (strongly) agreed to: An increase in knowledge on drug dosing (n=48; 60.7%); more willingness to take responsibility in health issues (n=48; 60.7%); feeling more secure in handling their medication (n=54; 68.4%); better relationship with their pharmacist and physician (n=63; 79.8% and n=57; 72.1%, respectively); feeling safer because somebody is taking care of the medication (n=63; 79.7%). The majority of the patients was (very) satisfied with the service (n=74; 93.7%).

Conclusion The patients rated the perceived changes and benefits overall positively, most often reporting an increased feeling of safety and a better relationship with the healthcare professionals. In contrast, only approx. 24% realized that DRPs were identified and solved although this was reported for almost all patients by the pharmacists. This indicates that patients might focus on other factors than healthcare professionals. Therefore, more research is needed to understand patients' assumptions of and expectations on pharmacist and interdisciplinary care.