# Workshop 6
# *Let's do it.* Developing a joint, international, PCNE project

**Participants:** Ana Janežič, Slovenia; Ana Maria Dago Martínez, Spain; Ana Molinero, Spain; Elisabeth Pfister, Germany; Igor Locatelli, Slovenia; Maissun Al-Kaddah, Germany; Markus Messerli, Switzerland; Olaf Rose, Germany; Yunn-Fang Ho, Taiwan;

**Facilitators:** Filipa Alves da Costa, Portugal; Lea Knez, Slovenia

**10th PCNE Working Conference, 1-4 February 2017, Bled, Slovenia**

# Day 1, session 1

- Aim of this workshop is…

to outline a study/project in a given research area;

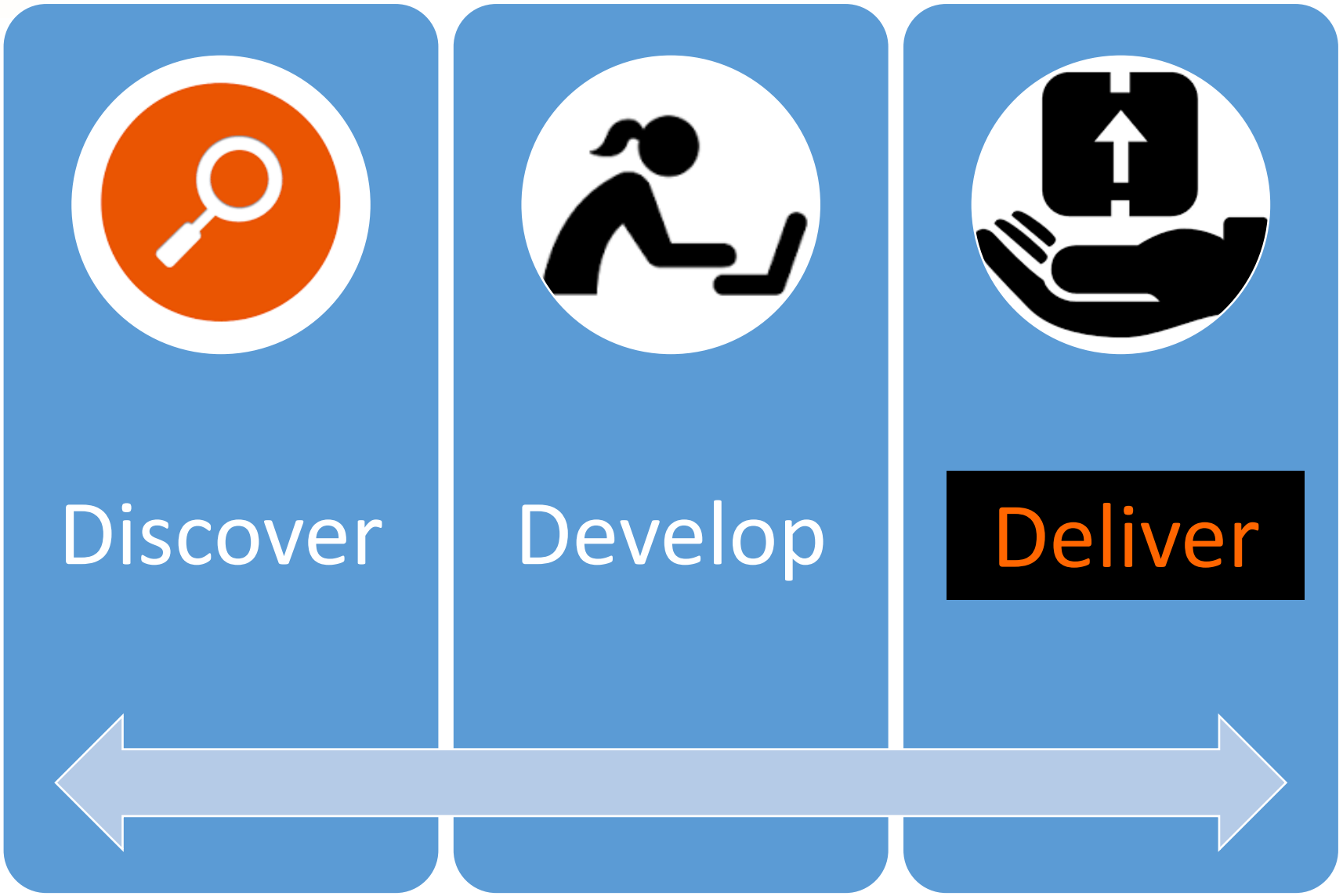
- The ultimate goal is..

to draft a grant application for Horizon 2020, including a minimum of 3 partners

- During this session, we intend…

to define a good research question

# What is Horizon 2020?




**80 B €**
**2014-2020**

# General reflections on the idea

Of course, it should be…

…something that strongly interests PCNE

…something that is important and relevant for the society

…something that is new and creative.

But should also provide…

…new data, generally unnoticed by other healthcare professionals

…promises of improved outcomes by optimisation of drug therapy

…tangible benefits for patients.

# General reflections on the consortium

PCNE offers a great network of pharmaceutical care researchers across various countries and sites, offering the possibility to…

…exploit the infinity of expertise

…rapid collection of large number of data

…but also challenges how to appropriately address the large variability of practices across different sites

We are great on our own, but together it is more fun…

…take advantage of PCNE liasions with other organisations

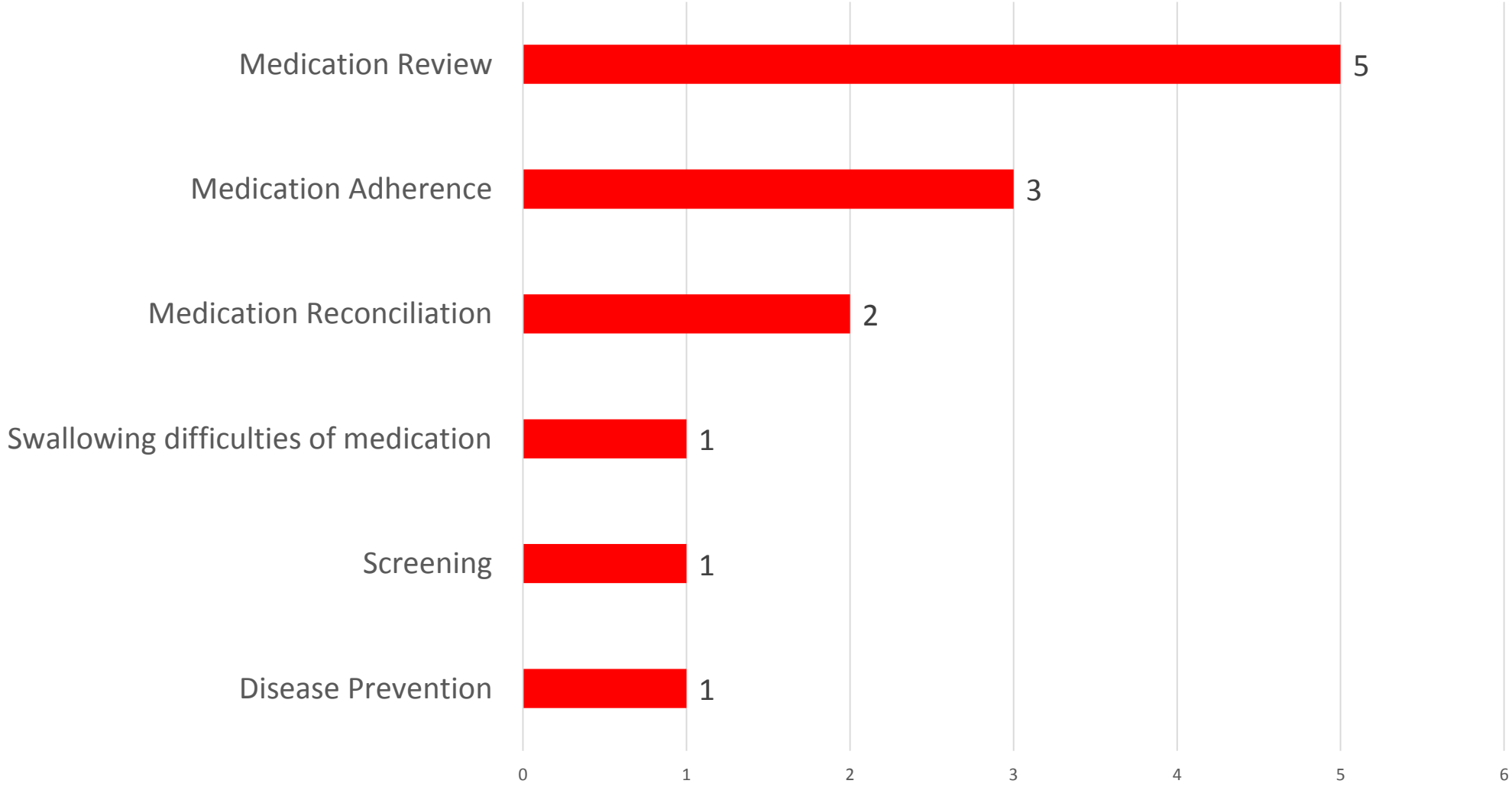
…consider patient organisations as partners

# General reflections on the proposal

To be practical and deliverable should tackle the challenges of a joint, international project:

- Keep the impact of the diversity among practices to a minimum
- Keep adherence to the study protocol high
- Keep the data collection burden to a reasonable level
- Keep the outcomes maturable during the study time frame
- Keep dependency from other professions to a minimum
- Keep the motivation of participating sites, pharmacists and patients high
- Keep in mind also budget uncertainties

# Responses from the survey: general topics



# Medication review

- Definition:

*Medication review is a structured evaluation of a patient‘s medicines with the aim of optimising medicines use and improving health outcomes. This entails detecting drug related problems and recommending interventions.*

PCNE, 2016

- Why chosing this topic?

Participants were asked to defend their ideas.

# Medication adherence

- Definition:

*Adherence to medication is the process by which patients take their medications as prescribed.*

Vrijens B, et al, Br J Clin Pharmacol 2012

- Why chosing this topic?

Participants were asked to defend their ideas.

# Medication reconciliation

- Definition:

*Medication reconciliation is the process of creating the most accurate list possible of all medications a patient is taking - including drug name, dosage, frequency, and route – and comparing that list against the physician's admission, transfer, and/or discharge orders, with the goal of providing correct medications to the patient at all transition points.*

Institute of Healthcare Improvement, 2011

- Why chosing this topic?

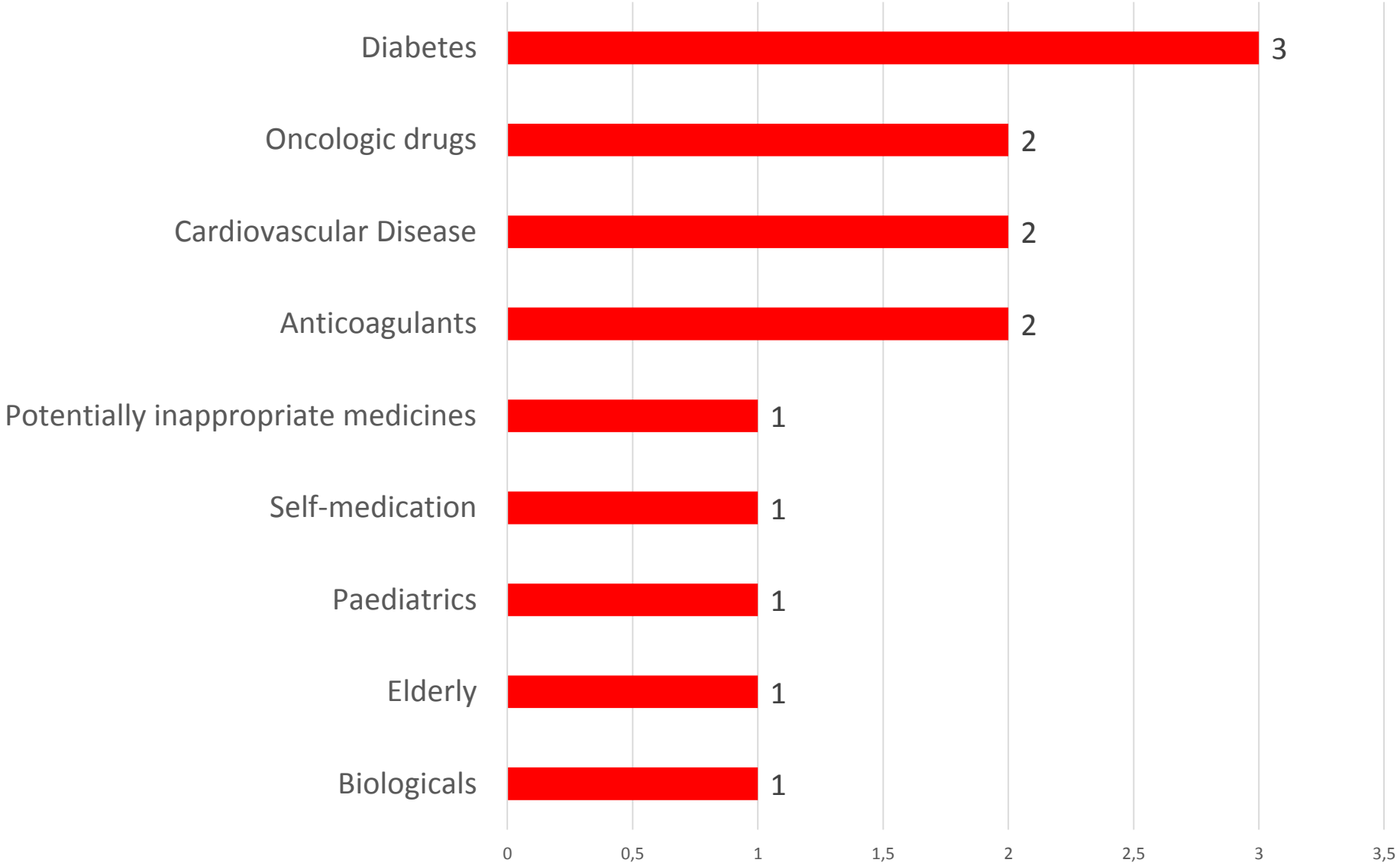
# Prioritise between the top 3 topics

| Topic | 1st (3 points) | 2nd (2 points) | 3rd (1 point) | Total |
|---|---|---|---|---|
| Medication Review | 18 | 6 | / | 24 |
| Medication Adherence | 6 | 8 | / | 14 |
| Medication Reconciliation | 3 | 4 | / | 7 |

After a Nominal Group technique, the top rated topics were Medication review and Medication Adherence.

Two groups worked on Medication Review and one group on Medication Adherence.

# Additional information from the survey held prior to the conference: Topics related to a specific drug, disease or patient group



# Day 1, session 2: Let the competition start!

- Proposed research topic

- Proposed research questions

- Provide also arguments for
  - Why is the proposed research topic important for PCNE?
  - Why is the proposed research topic important for society?
  - What advances will it provide beyond the current state of art?
  - What benefits will it provide for the patients?

# *W6: Let's do it.* Developing a joint, international, PCNE project

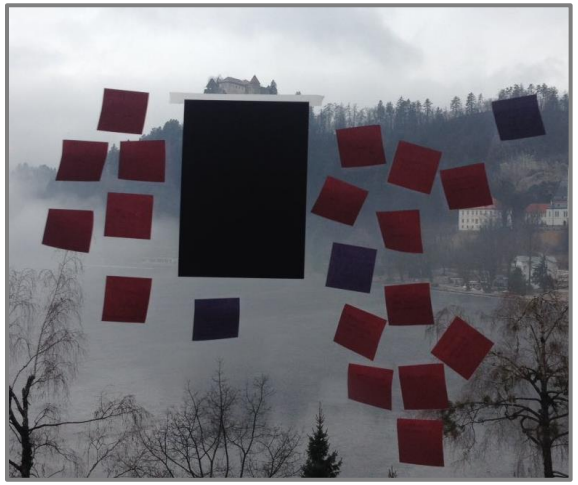
## Day 2, session 2: External evaluation for the best research question

**Key message:** emphasise that the intervention tackles an important unmet need for the patient rather than the intervention being offered by a pharmacist

RESEARCH QUESTIONS PROPOSALS REVIEWED BY EXTERNAL JURY

INDIVIDUAL BRAINSTORMING & GROUP DISCUSSION ON PROJECT CHARACTERISTICS

DRAFT PROTOCOLS FOR 2 RESEARCH PROJECTS

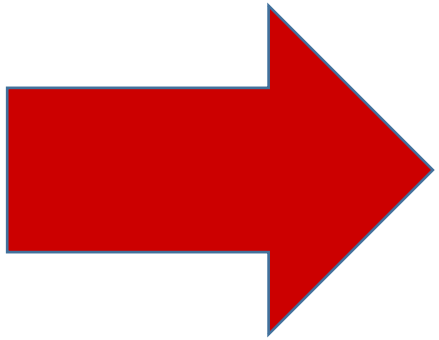


# Day 2, session 2: Starting the real research project

Refine research question:

Objectives:

- Study design
- Lenght of study
- Setting
- Patient selection
- Study design
- Defining the intervention
- Defining outcomes
- Tools for data collection
- Statistical analysis



**Day 3: The Projects**

**….**

## Project 1

**Research team:** Ana Janežič, Slovenia; Elisabeth Pfister, Germany; Maissun Al-Kaddah, Germany; Markus Messerli, Switzerland

# Pill  coach

Does tailoring an intervention lead to improved health outcomes compared to usual care in patients with oral antitumor therapy detected as non-adherent?

# The idea…

| | | | |
|---|---|---|---|
| Action taken |  Scan for non-adherence |  Tailoring and defining the intervention |   Performing the intervention |
| Performed by… | … various health care provider | … the **pillCoach** and the the patient | … various health care provider |
| Output of the project | Scanning algorithm to detect non-adherence, tailoring process to match an intervention with an individual patient´ profile, coaching program for primary care | | |

# Tailored interventions to improve medication adherence in young adults with type-2 diabetes in primary care

## Project 2

**Research team:** Ana Maria Dago Martínez, Spain; Ana  Molinero, Spain; Igor Locatelli, Slovenia; Olaf Rose, Germany; Yunn-Fang Ho, Taiwan;

**Objectives:**

To determine the reason why patients do not take their medicines

To develop and validate a pre-screening tool for non-adherent patients

To develop and validate tools to tailor adherence interventions

To assess the outcomes of tailoring interventions to enhance adherence

## Methodos

### 1. Patients

Inclusion criteria:

- younger patients with diabetes type 2 (18-50 years);
- taking antidiabetic drugs

Exclusion criteria:

- patients treated only with diet
- patients with HbA1c controlled at the moment of recruitment
- intellectual disabilities,
- language barriers

## 2. Possible outcomes:

- proportion of days covered/medication possession ratio, knowledge about illness and drugs,
- disease outcome: HbA1c, LDL, blood pressure,
- total number of drugs (total and antidiabetics),
- treatment outcome: ADE (hypoglycemic events reported by patients),
- major cardiovascular events, microcardiovascular events
- hospital admission, ER visit, GP contacts

## 3. Design:

- prospective cluster randomised stepped-wedged design
- intervention time min. 12 months, additional follow-up of 3 months
- prescreening questionnaire by pharmacist
- in eligible patients: screening of adherence during patient interview using another questionnaire
- cluster randomisation by biometrician

tailored intervention based on non-adherence type based on WHO classification: health system, condition, patient, therapy, socioeconomics; based on a medication review type 2A

- intervention: tailored to the type of nonadherence reasons
- assessing outcomes every 3 months