

G-1450 Development of shared care guidelines in rheumatology

Background: The use and administration of rheumatology drugs such as disease modifying antirheumatic drugs and biological agents requires effective patient monitoring at all settings of care. Within a multidisciplinary team setting such as rheumatology, shared care guidelines improve the management of patient care and outline responsibilities of the pharmacist within the team.

Purpose: To develop shared care guidelines for rheumatology drugs used in the treatment of various rheumatic conditions with the intent of providing seamless care between primary and secondary care settings.

Methods: A literature review was carried out to identify already existing shared care guidelines in rheumatology. Discussions with an expert panel consisting of a consultant rheumatologist, specialised rheumatology nurse, rheumatology specialist trainee, a research and academic pharmacist, general practitioner, and a community pharmacist were undertaken. This was done to identify which rheumatology drugs need revision and amendments, as well as to determine which other drugs necessitate the development of new shared care guidelines. A comparative study was carried out to analyse the key principles required to be included in the template. The designed shared care guidelines will be evaluated by an expert panel at the Rheumatology Clinic. Following approval, the shared care guidelines will be published online for public access.

Findings: Consultation with the multidisciplinary team yielded the need for revision of the currently available patient management guidelines available for rituximab, infliximab, and zoledronic acid. It was concluded that new guidelines need to be written for the following drugs used in rheumatology: methotrexate, leflunomide, sulphasalazine, gold injections, azathioprine, ciclosporine, etanercept, and adalimumab to help in the standardisation of treatment. The following set of parameters were designated to be included in the guidelines; indication, co-administration of other drugs as necessary, dose, contra-indications, cautions, drug interactions, baseline screening, initial monitoring, stable dose monitoring, vaccination, side-effects and clinical pharmacist responsibilities.

Conclusion: The shared care guidelines for rheumatology drugs outlined above will provide the necessary information for healthcare professionals to further improve and effectively manage and monitor patients.

Location of Primary Work: Malta

