M-1456 Medication Use Review Service in Qatar: A Nationwide Study on Knowledge, Attitudes and Practices of Community Pharmacists

Background: The incidence of chronic diseases is increasing globally. Non-adherence to medications and other medication-related problems are common among patients receiving medications for chronic illnesses. Medication use review (MUR) is a service provision with accredited pharmacist undertaking structured adherence-centered reviews with patients on multiple medications. To our knowledge, MUR services are not yet available in community pharmacies in Qatar.

Purpose: This study aims to evaluate the knowledge, attitudes and perception of community pharmacists towards establishing MUR as an extended role in patient care.

Methods: A cross-sectional survey using a self-administered questionnaire was conducted among community pharmacists in Qatar from December 2012 to January 2013. The study population involved pharmacists practicing in the private community pharmacy setting. Data collected were analyzed using SPSS® version 20. Descriptive and inferential statistics were used for data analysis. The study was approved by the Institutional Review Board of the Supreme Council of Health, Qatar.

Findings: A total of 123 community pharmacists responded to the survey (response rate 56%; 123/220). The mean knowledge score (±SD) was 71.4% ± 14.7%. An overwhelming proportion of the participants (97%) was able to identify the scope of MUR in relation to chronic illnesses and at enhancing the quality use of medicines. Further, 80% of the community pharmacists were able to identify patients of priority for inclusion in an MUR program. However, less than half of the pharmacists knew that acute conditions are not the principal focus of MUR services. At least 95% of the participants acknowledged that provision of MUR services is a great opportunity for an extended role of community pharmacists and that MUR makes an excellent use of the pharmacists professional skills in the community. The participants generally reported concerns about time, dedicated consultation area, and support staff as significant barriers towards MUR.

Conclusion: This study suggests that community pharmacists in Qatar had sufficient knowledge about the concept of MUR and its scope, but there were still important areas of deficiencies about the practice. The findings have important implications on policy and practice, particularly pertaining to the implementation of MUR as an extended role of pharmacists and as part of Qatar National Health Strategy to move primary health care forward in the country. Further training and education through continuing professional development programs and accreditation is warranted for community pharmacists before implementing MUR service in Qatar.

Location of Primary Work: Qatar