



## PHARMACEUTICAL CARE NETWORK EUROPE

### Working Conference 2011 – Abstract

Does pharmaceutical care impact on the safety of individual patients?

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The above mentioned participant in the PCNE WC 2009 wishes to submit following abstract for a poster or short oral communication (please type & then fax the form to the secretariat). Max. 350 words.

<b>Title</b> Prevalence of unreached cardiometabolic targets among treated patients – sub-analysis of data from a community pharmacy screening campaign in Switzerland
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<b>Type of abstract</b>  <input checked="" type="checkbox"/> Research <input type="checkbox"/> Practice development <input type="checkbox"/> Practice implementation
<b>Aim of project/study</b> Screening for cardiometabolic risk factors provided by community pharmacies attract also patients already treated for cardiovascular risks. A previous retrospective analysis of data from 4380 subjects demonstrated that one third of patients with prescribed medicines for antihypertensive (AHT) and lipid modifying therapy (LMT) did not reach their biomarker targets as defined by guidelines (1).  This prospective study aimed at confirming the results of the pilot study based on data that was collected within a refined screening campaign with standardised measuring methods and specific training of pharmacists.
<b>Method</b> In a screening campaign for cardiometabolic risk factors, blood chemistry, blood pressure (BP), waist circumference (WC), drug therapy and physical activity were assessed in Swiss pharmacies arranged in the group TopPharm in April 2010. “Not on target” was defined as having a BP $\geq$ 140/90 mmHg (systolic/diastolic BP), or $\geq$ 150 mmHg (isolated systolic BP) for patients with a prescription for AHT, LDL-C $>$ 3.4 mmol/l for patients with LMT, fasting glucose $\geq$ 8.0 mmol/l for subjects with antidiabetic treatment (ADT) or if WC was $>$ 88 cm for women or $>$ 102 cm for men.

**Result(s)**

From a total of 1347 screened subjects, 329 (24.4%) were eligible because they had a prescription for either AHT, LMT, ADT or any combination. Increased WC was evident in 183 (= 55.6%). Of 261 patients with AHT, 106 (40.6%) were not on target because they violated either the systolic/diastolic (n=62, 23.8%) or the isolated systolic BP (n=44, 16.9%) criterion. LMT was prescribed in 122 patients, of which 38 (31.2%) were not on target. Glucose targets were not reached by 8 (27.6%) of 29 patients with ADT.

In conclusion, screening detects an important proportion of patients (43.8%) who despite prescribed therapy fail to achieve treatment targets. Thus, validated intervention are needed to support community pharmacies in addressing contributing factors to therapy failure, such as non-compliance, unfavourable lifestyle, drug interactions, improper dosing.

Reference (1) Walter P. et al., Poster PRS-50, ESCP 2010, Lyon France