



## PHARMACEUTICAL CARE NETWORK EUROPE

### Working Conference 2013 – Abstract

Collaborative pharmaceutical care in research and practice

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The above mentioned participant in the PCNE WC 2013 wishes to submit following abstract for a poster or oral communication. If accepted and presented, the abstract will be published in the International Journal of Clinical Pharmacy. Please make sure the abstract is no longer than 350 words, excl. author-details.

<b>Title</b> A novel instrument to measure medicines-related quality of life
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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>Background</b> Research evaluating medication review and similar services frequently incorporates generic quality of life measures insensitive to small changes in medicines use, or disease-specific measures, which focus on the impact of the disease, not the impact of medicines. Other tools can assess patient satisfaction with services, satisfaction with information about medicines and beliefs about medicines, but none are designed to detect changes in the overall impact of using medicines on quality of life.

**Aim**

To test a novel generic tool for measuring quality of life related to long-term medicines use

**Method**

NHS ethics approval was obtained. Patients were identified from two medical practices by practice pharmacists. The final questionnaire was distributed by post to two patient cohorts (A): confirmed as regularly collecting at least four repeat prescription medicines and (B): eligible for medication review because they used any medicines long-term.

**Results**

In total 828 questionnaires were distributed to (A) and 529 to (B), of which 189 (22.8%) and 160 (30.2%) were returned. There were no differences in individual statement responses, theme scores and overall scale scores between cohorts. In the combined dataset, theme scores or overall score were not related to gender or age, but number of medicines was significantly related to overall score and most theme scores (Practicalities, Information, Control, Efficacy, Side effects, Attitudes and Impact: ( $P < 0.05$ ), except 'Relationships with health professionals'. Factor analysis indicated 15 potential components, with 33/60 items loading onto one component, suggesting that the data do not support the proposed themes derived from qualitative data.

**Conclusion**

The instrument shows good consistency in findings between two different populations of patients in primary care taking long-term medicines. It could be used to assess long-term medicines use on quality of life, or in studies to measure the effect of pharmacist or other health professional interventions.