



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.

Title: Adaptation and validation of a drug related problem classification tool in community pharmacy		
Author(s): C. De Vriese, G. Sansterre, I. De Wulf, C. Claeys		
Type of abstract		
<input type="checkbox"/> Research	<input type="checkbox"/> Practice development	<input checked="" type="checkbox"/> Practice implementation
Aim of project/study		
The aims of the study were:		
1) To translate and adapt the PCNE drug related problems (DRP) classification tool (v.6.2.) to the Belgian community pharmacy setting		
2) To assess the content validity and the reliability of this classification tool		
Method		
The translated and adapted version of the tool was submitted to a group of 15 pharmacists, which reviewed the format and content of the items. Content validity indexes were calculated. After adaptation of the tool, 109 DRP were collected in community pharmacy and 56 of these DRP were submitted to 10 community pharmacists to test the inter-rater reliability of the tool.		
Result(s)		
The PCNE classification tool has been translated in french and adapted by adding 11 items in the section « causes » (mostly related to the logistics of the prescribing and dispensing process, and related to the behaviour of the patient), and 2 items in the section « interventions ». The process of content validation resulted in modifying the definitions of potential problem and manifest problem, and in adding 2 items in the section “causes”. The final adapted tool included 84 items classified in 4 sections (problems, causes, interventions and outcomes), with full instructions on how to use it. In term of reliability of the tool, the inter-rater agreement was very good between the pharmacists since it was of 90% for the majority of the items. However, the agreement		

for “potential problem”, “manifest problem” and “effect of drug treatment not optimal” was only of 59%, 61% and 69%, respectively, suggesting some lack of understanding for those items. Concerning the outcomes of pharmacist’s interventions, the agreement was of 80% for the item “problem totally solved”. A difference in pharmacist’s perception to consider that the intervention is sufficient to totally solve the DRP could explain this result.

In conclusion, these results showed that the tool is reliable and has adequate validity to measure the frequency and the nature of DRP detected in a Belgian community pharmacy setting.

+++ NB: PhD students still pay the early bird fee for their abstract if their abstract is accepted ++++