



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.

<p>Title</p> <p>Community Pharmacies: from dispensing drugs to pharmaceutical care. Actors involvement in the wider health service network</p>
<p>Author(s)</p> <p>GIANCARLO NADIN</p>
<p>Type of abstract</p> <p><input type="checkbox"/> Research <input type="checkbox"/> Practice development X <input checked="" type="checkbox"/> Practice implementation</p>
<p>Aim of project/study</p> <p>In Italy a 2009's law introduced service offering in the pharmacies. The author administered an explorative survey aimed to assess the "sentiment" of these professionals in order to embrace the opportunity opened up by the new law (Nadin and Pacenti, 2011). Shadows and lights have emerged; one of the main issue, as detected as well as by international literature surveys, encompasses relationship with other health care operators such as GP (General Practitioners), specialists, therapists, nurses, etc.. The separated silos erected in the past among the operators do not facilitate the high level of communication required to manage, in a coordinated way, the patient pathology as in a networked perspective would be asked.</p> <p>In this paper the author wants to investigate problems and opportunities related to the relationship between pharmacists and health care operators revisited in the light of the patient perspective.</p>
<p>Method</p> <p>The paper wants to cover these aspects of the relationship by the analysis of an experimental sample of dual relationship: physicians and pharmacists involved in pharmaceutical care (medication therapy management, compliance, review of the therapy, drug to drug interaction, adverse effect of medication, etc.).</p> <p>The relationship will be examined under the lens of the ARA model depicted by the IMP's school of</p>

though. Therefore the paper tries to outline actors bonds, resources involved and activities put in place by the operators to improve coordinated service to the patient and at the same time pursue their personal goals.

This paper must be intended as a first step analysis aimed to design a wider quantitative research focused on the collaboration among health care operators.

Thus first insights and findings will be discussed in the perspective of the designing the framework for an extensive research.

Result(s)

Specified duties and responsibilities are required and clear stated but the optimization of the service offered to the patient walks through interchange and collaboration. Therefore it becomes pivotal to rethink correctly the degree of freedom and consequently the burden of risk between the operators.

The pharmacist's beliefs and attitudes play an important role in their intentions to collaborate with physicians. The findings suggest a strategy that involves collaboration to improve medication adherence and this can be most effective (Kucukarslan et al. 2010).

Although this analysis has no statistical validation and is explorative in the domain of physician-pharmacist relationship some consideration can be proposed.

The style of conduction impressed to the cure path by the physician has a great impact on the relationship with the pharmacist. Since the first is a predictor for the latter it is necessary to investigate the model of cure chosen by physician to set up and improve the physicians-pharmacist relationship. The relationship between physician and pharmacist is also a predictor for the relationship with patients and it can become a truly constraint for pharmacist.

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