

OLDER PERSONS' PERCEPTION OF PHARMACY SERVICES

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INTRODUCTION

Pharmacists have a key role in the care of geriatric patients to optimise chronic disease management, minimise polypharmacy and improve medication adherence.¹

AIM

To assess the perception of older persons about received pharmacist services and care services.

Setting: Day hospital and medical outpatients, Karin Grech Hospital (KGH) in Malta.

METHOD

- A questionnaire developed and validated in a previous study² available in English and Maltese, was administered as a semi-structured interview to patients ≥ 60 years after approval from the hospital Research Committee.
- The questionnaire collected information on living situation, number of medicines taken, co-morbidities, and perception of pharmacist-patient relationship and pharmacist services.
- Descriptive statistics were performed.

RESULTS

- 200 patients were interviewed; 64% (n=127) were ≥ 75 years old, 67% (n=133) female, 77% (n=154) had both primary and secondary level education, 23% (n=46) lived alone.
- The mean number of co-morbidities was 2 (range 0-8) and 62% (n=123) of the patients reported to have been hospitalised once or more than once in the past year.
- 65% (n=130) of the patients take ≥ 4 medicines daily and 69% (n=138) have been visiting the same community pharmacy to collect their free National Health Service-entitled medicines for ≥ 5 years.
- 84% (n=167) of the patients have received medicine-related advice from their pharmacist.
- 31% (n=61) of the patients had a medication use review (MUR) performed by a pharmacist and 76% (n=151) were in agreement with regular pharmacist-led MUR.

Table 1: Patient confidence, awareness and perception of pharmacist services (N=200)

Do you feel confident that you are taking your medications correctly?	Yes 94%
Are you aware of the indications of your medications?	Yes 87%
Do you call your pharmacist when you have any queries?	Yes 67%
Are your queries clarified by the pharmacist?	Yes 63%

CONCLUSION

Patients in this study sought pharmacist advice. Patients were in favour of pharmacist-led MUR which has the potential to individualise pharmaceutical provision to improve patient safety and quality of life in chronic disease management in older persons.

REFERENCES

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