

Opinions of community pharmacists on their role in the prevention of cancer

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Focal points

- Community pharmacists are in a prime position to advise their patients on healthy lifestyle changes which may reduce the risk of cancer
- Qualitative analysis of semi-structured interviews with six community pharmacists was used to design a postal questionnaire sent to 511 community pharmacists in Northern Ireland
- Younger pharmacists (<40 years of age) were prepared to take on newer roles such as provision of breast and cervical cancer information
- With reference to cancer prevention and control, pharmacists were active in the role of counselling on smoking cessation, diet and sunscreen use
- Community pharmacists would be prepared to take on services including cervical smear and mammogram referral and counselling

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Introduction

Cancer is one of the leading causes of high morbidity and mortality in the United Kingdom; Northern Ireland consistently has a recorded crude incidence rate of approximately 520 per 100,000 of the population.¹ Studies have shown that although inherited genetic factors play a part in the development of the disease, environmental factors including diet, exercise behaviours and smoking status are the main contributors in most cases.²

Community pharmacists are in a prime position to advise their patients on healthy lifestyle changes that may reduce the risk of cancer; their location makes them accessible to the public with contact being made with over 90 per cent of the population per year in the course of their business.³ The purpose of this study was to determine the current role of community pharmacists in the prevention and control of cancer and also to identify areas for future research and development.

Method

Qualitative analysis of semi-structured interviews with six community pharmacists assisted in the identification of themes to be addressed within a postal questionnaire. A 105-variable questionnaire was prepared and piloted in randomly selected community pharmacies (n=25). The final questionnaire was mailed to all community pharmacies in Northern Ireland (n=511). The themes addressed included community pharmacist opinion on their present and potential role with regard to counselling on diet, exercise, smoking, sunscreen use, breast cancer referral and cervical cancer screening referral. On return of the anonymous questionnaires (response rate 40.8 per cent) all data were coded and entered into SPSS (version 11) for analysis. Chi-squared, t-tests, bivariate correlations and multivariate analyses (logistic regression) were used to determine the relationships between the variables.

Results

Of the 209 respondents (56 per cent male, 44 per cent female), 59.3 per cent worked within an independent community pharmacy with the remainder working for a chain or multiple. The mean number of patients claimed to have been seen by a community pharmacist in a typical working day was 118.

The average reported percentage of time spent counselling these patients was significantly higher in female than male respondents (19.4 per cent male vs 25.9 per cent female, independent samples t-test, $P=0.006$). A total of 27.3 per cent of respondents claimed they had either no or poor knowledge on cancer prevention issues, 2.9 per cent considered their knowledge to be extensive while 67.0 per cent said they believed cancer prevention counselling to be worthwhile with smoking cessation being regarded as the most beneficial area. Barriers to this type of counselling included lack of funding, knowledge, time and privacy.

Chi-squared tests revealed a number of statistically significant relationships including: a pharmacist being female and recognising that customers may be too embarrassed to ask about cervical smears ($P=0.001$, odds ratio (OR) 2.8); a pharmacist working for a chain/multiple pharmacy and providing leaflets on breast cancer ($P=0.02$, OR 2.0) and promoting regular mammography ($P=0.05$, OR 2.2); a pharmacist being a smoker and provision of leaflets during smoking cessation counselling ($P=0.03$, OR 10.3) and discussion of health benefits during smoking cessation counselling ($P=0.05$, OR 4.0). Univariate and multivariate analyses confirmed that younger pharmacists (<40 years of age) were prepared to take on newer roles such as provision of breast and cervical cancer information.

Discussion

The study revealed that with reference to cancer prevention and control, pharmacists were active in the role of counselling on smoking cessation, diet and sunscreen use. With further training and resources they would be prepared to take on services including cervical smear and mammogram referral and counselling.

References

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- 3 Anderson C. Health promotion in community pharmacy; the UK situation. *Patient Educ Couns* 2000;39:285–91.