

# LATEST *IJPP* FOCUSES ON NEW PHARMACY SERVICES IN PRIMARY CARE

*Some of the research published in the December issue of the International Journal of Pharmacy Practice is highlighted by Joanna Lumb, managing editor, IJPP*

**T**hree papers in the latest *IJPP* report evaluations of aspects of new pharmacy services provided in United Kingdom primary care.

From Scotland, general practitioners' views of a pharmacist-led medication review (PLMR) service were assessed. The PLMR service is offered in Greater Glasgow by a team of specifically trained pharmacists, mainly from community pharmacy backgrounds, who work within general practices for one day a week. A questionnaire was sent to GPs in 82 practices where PLMR clinics were held. There was an 84 per cent response.

Nearly all GPs thought that the service was useful. Perceived benefits included improved prescribing practice, raised standards of patient care and satisfaction, and increased GP knowledge and confidence. Problems that were reported included space and time constraints, limited GP-pharmacist contact, and occasional patient dissatisfaction. Ninety-five per cent of GPs believed that benefits of the service outweighed problems.

The GPs had divided views on whether PLMR increased or decreased practice workload.

## REPEAT DISPENSING PROJECT

Researchers from Aston University have evaluated one of the Department of Health-funded repeat dispensing projects. They specifically report now on changes in dispensing volume and costs.

Patients were provided with two successive three-monthly repeat prescriptions containing all their "repeat" medicines, valid at a study pharmacy. Pharmacists consulted with patients at the time of supply and a joint agreement was reached on which medicines were needed.

Around 25 per cent of the items that patients could have received were not dispensed during the study period. Since patients do not always ask for all items allowed on repeat, to give a more realistic estimate of the changes, a comparison was made with items prescribed during the six months before the study. This showed an estimated 11.3 per cent saving in drug costs compared with the pre-intervention period.

Pharmacists were paid on a capitation-based system, rather than fee per item, to avoid any disincentive not to supply. This system was acceptable to all but one of the study pharmacists.

The authors suggest that there is now a need for a large-scale study with full cost-benefit analysis.

## WHAT DO PATIENTS WANT?

More evidence that not all patients want the same service from their community pharmacy comes from data collected as part of an evaluation of patients' perspectives on electronic transmission of prescriptions (ETP).

Researchers from Manchester University set out to examine whether, how and why choice and use of pharmacy services differ between patients, and how introduction of ETP and mail order pharmacy might impact on patient choice.

They collected data, by questionnaire and interviews, from patients participating in the ETP pilot studies and from patients who had declined to participate. Patients wanted a "convenient" prescription service but definitions of convenient varied, with different patients valuing different aspects of the service. Some, for example, welcomed the idea of not having to go to the surgery to collect their prescription, or to the pharmacy to collect their medicines, while others preferred — and found it convenient — to maintain their current level of contact with GP and pharmacist. Some liked to be able to check that their prescription was for the correct medicine. Many infrequent users were satisfied with the current prescription services.

Patients who chose not to participate in ETP were less likely than participants always to use one pharmacy.

The authors comment: "While some patients who are prescribed regular repeat medication may welcome a greater choice of



services, others may feel that the existing choice is adequate. . . . The profession needs to ensure that the services offered cater for a variety of different needs."

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## Articles in December issue of *IJPP*

- Pharmacist-led medication review clinics in general practice: the views of Greater Glasgow GPs (F. MacRae, R. Lowrie, A. MacLaren, R. Barbour and J. Norrie)
- Use of over-the-counter medicines in children (J. McIntyre, S. Conroy, J. Collier, N. Birchley, S. Rodgers, K. Neil, I. Choonara and A. Avery)
- Community pharmacists' identification of natural health product/drug interactions in older persons (R. Grymonpre, M. McKechnie and C. Briggs)
- Dispensing activity in a community pharmacy-based repeat dispensing pilot project (K. Wilson and J. Jesson)
- Pharmacy services and patient choice: insights into differences between patient groups (S. Phul, S. Cooper and J. Cantrill)
- Medically-enhanced normality: An alternative perspective on the use of medicines for non-medical purposes (C. Møldrup, J. Morgall Traulsen and A. Birna Almarsdóttir)
- The risk society (J. Morgall Traulsen and P. Bissell)