PHARMACIST REVIEW OF MEDICATIONS FOR HIV-POSITIVE PEOPLE SEEN IN GENERAL PRACTICE (PROM-GP)

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Objectives: As the HIV-positive population grows older on effective antiretroviral therapy (ART), increasing co-morbidities, and resultant polypharmacy play a significant role in the complexity of holistic patient care. A clinical pharmacist with HIV-experience can have significant impact on the management of medication related problems (MRPs), for example, drug interactions, adverse effects, or co-morbidity management. The aim of the study is to evaluate the effectiveness of a HIV specialist pharmacist providing a single face-to-face patient consultation within HIV high caseload general practice clinics.

Methods: The GP or practice nurse refers eligible patients: those currently prescribed ART with \geq 1 risk factor for MRPs, for example polypharmacy or age \geq 50 years in this ongoing prospective study. A single patient/pharmacist consultation occurs within the clinic and a report outlining MRPs and recommendations are provided to the GP. Adherence (self-report and pharmacy pick-up) and patient satisfaction (validated survey) are also measured. Medical notes are reviewed at 3 to 4 months to assess resolution of MRPs.

Results: Between February and August 2016, 100 HIV-positive patients completed the pharmacist consultation, across three Melbourne clinics (median age 58 years, 98% male, median co-medications, 7). 542 MRPs were identified (27 high, 235 moderate and 280 low risk using a validated risk-assessment model), representing a median of 2 (IQR 1,3) high or moderate risk MRPs per patient. The most common MRPs were drug interactions (23%) and additional requirement for monitoring (29%); most monitoring MRPs (70%) were low risk. At follow-up, 60% of MRPs were resolved. Patient satisfaction was high.

Conclusion: In the setting of an ageing HIV population, a multidisciplinary team-based approach will be increasingly helpful to assist with management of co-morbidities, and prevention of adverse outcomes associated with polypharmacy. This work is ongoing with plans to recruit a further 400 patients, as part of a larger national multi-site study.

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