

## ORIGINAL PAPER

# Management of the early symptoms of influenza-like illnesses and ear, nose and throat (ENT) disorders by pharmacists

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**Background:** Pharmacists play a key role in primary healthcare, but the characteristics of patients who consult a pharmacist directly rather than going to their general practitioner (GP) are unknown. Our aim was to describe the socio-demographic and clinical characteristics of patients who seek direct therapeutic advice from a pharmacist for influenza-like illness (ILI) or ear, nose and throat (ENT) disorders, the types of medicines dispensed and patient satisfaction with the advice received.

**Methods:** This prospective, observational study was carried out on a random sample of French pharmacies between November 2010 and March 2011. Patients ( $\geq 12$ -years) with early symptoms of ILI or ENT disorders ( $< 36$  h duration) who received treatment were included. Socio-demographic data, symptom severity and disease impact on daily activities and sleep were recorded at inclusion. Symptom evolution and patient satisfaction were assessed after 3 days of treatment.

**Results:** 573 patients (mean age:  $42.5 \pm 16.2$  years; 61.9% female) were recruited by 133 pharmacies. Two-thirds of patients (63.2%) visited the pharmacy early ( $< 24$  h) after symptom onset. The most common symptoms were runny nose (56.4%), sore throat (54.6%) and cough (49.0%). Patients were given  $2.6 \pm 1.2$  medications; 98.4% of patients received allopathic (usually paracetamol, 33.5%) and 25.3% homeopathic (*Oscillococtinum*, 56.6%) treatment, usually combined with allopathy. Compliance was good and 77.2% of patients continued treatment for 3 days. Most symptoms improved significantly after 3 days and quality of life was enhanced. 85.9% of patients were satisfied with the advice received.

**Conclusions:** Seeking a pharmacist's advice for the management of ILI and ENT disorders has several public health benefits. The clinical improvement and high patient satisfaction observed validate the role of the pharmacist as a health professional of first resort. *Homeopathy* (2014) ■, 1–11.

**Keywords:** Disease management; Influenza; Human; Multicentre study; Patient satisfaction; Pharmacist; Homeopathy

## Introduction

In July 2009, a new law (Loi n°: 2009-879) was introduced in France with the aim of reforming and modernizing healthcare and the duties of the different healthcare providers with regard to patients, health and the territories.<sup>1</sup> This law reinforced the role of pharmacists in the healthcare system as a

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whole, acknowledging them as key players in the politics of disease prevention and the coordination of care.

In April 2012, a national organization representing pharmacists and the National Union of Health Insurance Funds (UNCAM) discussed a revised contract for pharmacists, reinforcing their duties and valorizing the quality of pharmacy practice. In many countries, pharmacists are able to offer advice to patients suffering from relatively minor complaints and to dispense over-the-counter (OTC) medicines for these illnesses. The revised contract in France reinforced the role of pharmacists as health professionals of first resort and their key role in identifying diseases for which they can deliver medicines directly OTC without a medical prescription. In addition to giving therapeutic and hygieno-dietary advice, pharmacists in France now play a crucial role in the therapeutic follow-up and monitoring of patients.<sup>2</sup> A more recent decree published in 2013 also enables pharmacists in France to carry out rapid diagnostic tests in order to determine whether infections are bacterial or viral in origin, to measure glycaemia or to diagnose group A streptococcal sore throat/tonsillitis or influenza.<sup>3</sup>

Almost three-quarters (72%) of French people are happy to be advised and treated by their pharmacist for minor respiratory illnesses (e.g. influenza, cold).<sup>4</sup> There are a number of reasons for this, including: (i) the close proximity of pharmacists to their patients; (ii) the ready availability of pharmacists without the need for a time-consuming medical consultation; and (iii) the often mild nature of these illnesses. When questioned, the majority of patients (94%) stated that they trust their pharmacist.<sup>4</sup> Seeking the advice of a pharmacist is considered to be safer than self-medication without advice, which remains a common practice in France.<sup>4</sup>

During the winter season, viral infections of the upper respiratory tract such as influenza-like illness (ILI) and ear, nose and throat (ENT) disorders are very common among adults and children.<sup>5</sup> A nationwide cross-sectional survey carried out in France between March 2007 and July 2008 showed that respiratory diseases represented 20% of reasons for consulting a general practitioner (GP).<sup>6</sup> Upper respiratory tract infections (URTIs) have a considerable socio-economic impact in terms of healthcare consumption, workplace productivity and work loss.<sup>7,8</sup>

The emergence of multi-antibiotic resistance has become a serious problem among many bacterial pathogens, largely due to antibiotic misuse and overuse.<sup>9–12</sup> Despite the fact that most URTIs are viral in origin,<sup>12</sup> the prescription of antibiotics remains high for these illnesses when patients consult their GP.<sup>12–14</sup> A number of strategies have been proposed for the better use of antibiotics<sup>9,10,13</sup> and guidelines have been published for antibiotic use in URTIs.<sup>14</sup> Seeking the direct advice of a pharmacist, who is unable to dispense antibiotics without a medical prescription, may contribute to less misuse of antibiotics in these illnesses. This type of care can also be extremely beneficial economically in terms of health insurance because there is no medical consultation and the treatments prescribed are paid for by the patients themselves.

Homeopathic medicines are more widely used in France compared to other countries. This can in part be explained by the high number of GPs in France trained in homeopathy ( $n = 1700$  in 2009),<sup>15</sup> by dispensing practices among pharmacists<sup>16</sup> and by the spontaneous demand of patients. The training of homeopathic practitioners is varied and is carried out by external organizations and academics. In the United States, homeopathic medicines are among the top 10 non-prescription products sold in the category of analgesics to treat coughs, colds and influenza.<sup>17</sup>

Although a study was carried out in France in 2009 to look at the management of ILI in the setting of GP surgeries,<sup>18</sup> little is known about the profile of patients who directly contact a pharmacist for advice, even though these individuals comprise a large proportion of the general population.<sup>4</sup>

### Aims and objectives

The aim of the current study was to describe the socio-demographic and clinical characteristics of patients with ILI or ENT disorders who directly seek the advice of a pharmacist about disease management, to describe the therapeutic advice given by the pharmacists including the medicines dispensed, to assess the clinical benefit to the patients and to identify independent predictors of patient satisfaction.

## Materials and methods

### Study design

This prospective, multicentre, observational study was conducted among a representative sample of randomly selected pharmacies throughout France over a 5-month period between November 2010 and March 2011, which covered the whole winter season and its associated diseases. The study was strictly observational, with pharmacists being free to offer pharmaceutical advice without any modifications to their usual management of patients. The trial was conducted in accordance with the principles of Good Clinical Practice in the conduct of pharmacoepidemiological studies<sup>19</sup> and obtained regulatory approval from the National Council of the Order of Pharmacists and ethical approval from the French data protection authority (Commission Nationale de l'Informatique et des Libertés). Patients were informed by the participating pharmacists that their responses would be kept confidential and they were not remunerated for participation. Pharmacists received compensation fees. The study was sponsored by Laboratories Boiron, whose name was not revealed to the investigators or the patients.

### Recruitment of pharmacies

The pharmacies were selected by a 2-step random sampling process. A first random selection was undertaken from the national register of pharmacies in order to ensure representativity of pharmacies across France. Assuming an anticipated participation rate of 10–15%, an initial sample of 1000 pharmacies was selected with regional

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