



ORIGINAL ARTICLE

Systematic review of the implementation and evaluation of Pharmaceutical Care in hospitalised patients (Pharmaceutical Care implementation in hospitalised patients. Systematic review)

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KEYWORDS

Pharmaceutical care practice;
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Abstract

Introduction: The persistence of drug-related morbidity and mortality of patients admitted to hospital means scientific criteria need to be identified for implementing and evaluating Pharmaceutical Care (phC) in a hospital setting.

Objective: To conduct a systematic review of the literature to identify, select and analyse studies on the implementation and evaluation of phC in hospitalised patients.

Material and methods: A search for articles related to clinical pharmacy (CP) and phC published between 1990 and 2006 was performed using a restricted search strategy combining all descriptors. The databases searched were Medline, Embase, Drug & Pharmacology and Cochrane Library. Original and review articles, available in English or Spanish, describing CP and phC programmes which had a participating pharmacist and were carried out on hospitalised patients were selected.

Results: Sixty-six articles were found, of which 49 (74.2%) were included and 17 (25.8%) excluded. 15 (22.7%) regarding the integration between CP and phC in hospitals were selected, as well as 18 (27.3%) on implementing phC and 16 (24.2%) related to the evaluation of phC programmes.

Conclusions: In the studies described, pharmacists have managed to incorporate phC programmes in the care activities of pharmacy services. Efforts to unify CP and phC criteria should be a common plan for the future in this profession. Patients treated must obtain specific health benefits from phC and medical institutions must recognise they have beneficial effects at a reasonable cost.

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PALABRAS CLAVE

Seguimiento farmacoterapéutico; Atención farmacéutica; Evaluación de programas; Efectividad; Eficiencia; Revisión sistemática de la literatura

Revisión sistemática sobre la implantación y la evaluación del seguimiento farmacoterapéutico en pacientes hospitalizados

Resumen

Introducción: La persistencia de la morbimortalidad relacionada con la farmacoterapia del paciente ingresado hace necesario identificar evidencia científica sobre la implantación y evaluación del seguimiento farmacoterapéutico (SFT) a nivel hospitalario.

Objetivo: Realizar una revisión sistemática de la literatura para localizar, seleccionar y analizar estudios sobre la implantación y evaluación del SFT en pacientes hospitalizados.

Material y métodos: Se realizó una búsqueda de artículos relacionados con la farmacia clínica (FC) y el SFT publicados entre 1990 y 2006, mediante una estrategia de búsqueda restringida combinando todos los descriptores. Las bases de datos consultadas fueron Medline, Embase-Drug & Pharmacology y Cochrane Library. Se seleccionaron artículos originales y revisiones que describían un programa de SFT y de FC, que contaban con la participación del farmacéutico, que se hubieran efectuado en pacientes hospitalizados y que estuvieran disponibles en inglés o español.

Resultados: Se localizaron 66 publicaciones, incluyendo 49 (74,2%) y excluyendo 17 (25,8%). Se seleccionaron 15 (22,7%) sobre la integración entre la FC y el SFT en el ámbito hospitalario, 18 (27,3%) respecto a la implantación del SFT y 16 (24,2%) relacionadas con la evaluación de programas de SFT.

Conclusiones: En los estudios descritos, los farmacéuticos han logrado incorporar el SFT a las actividades asistenciales de los servicios de farmacia. Aunar esfuerzos para unificar los criterios de la FC y el SFT debe ser un plan para un futuro común en esta profesión. Del SFT, los pacientes atendidos deben obtener resultados en salud concretos y las instituciones hospitalarias deben reconocer sus efectos beneficiosos respecto a unos costes razonables.

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Introduction

For more than twenty years, pharmacy services have been established allowing reciprocal intervention of the pharmacist as pharmacotherapy has constantly developed.¹ However, there are numerous published studies that show that many admissions to hospitals,^{2,3} emergencies,^{4,5} and health problems during admission are due to the medication given to patients.^{6,7} It is essential for pharmaceutical services to continue evolving towards a healthcare perspective, as preventable morbidity and mortality related to drug dispensing are still unresolved.⁸ Therefore, it is a priority to implement a pharmaceutical care programme (phC) in hospital units, consisting of strategies devised in this field, to obtain better drug therapy results.⁹ To provide this solution, pharmacists have been incorporating phC in the design, implementation and optimisation of hospital pharmaceutical services, alongside concepts of continuous improvement and quality assurance.^{10,11} Such integrated clinical actions by pharmacists have led to pharmacological treatment being optimised in the patients they serve every day, regardless of the care setting.^{12,13}

As a result, phC programmes have increased and developed in recent years in different care fields in many countries. However, in many cases, phC has lost its focus as a clinical practice for evaluating and monitoring drug therapy as a way to improve or achieve health outcomes that depend on the particular needs of the patient. Many programmes have

lost sight of the fact that it is a process focused on patient care, and must be implemented by a method with a logical sequence which is systematic, continuous and documented. Drug therapy must be monitored and evaluated by a standardised methodology to allow phC to be implemented. Using a systematic procedure provides for consistent performance. Standardised methods and specific documentation provided for each patient provide not only a record of the care process, but allow other pharmacists and other health team members to promote continuity in this type of care.¹⁴

There is evidence that phC is able to promote both the improvement of health care for patients, with its consequent health benefits, and strategies aimed at developing the abilities and skills of pharmacists and physicians, who evaluate the overall quality of pharmacotherapy.¹⁵ However, this does not provide convincing evidence of changes in health outcomes, as it is distorted by other pharmaceutical interventions which are not oriented towards patient care; therefore, the effectiveness and efficiency of phC has not been conclusively shown.

Therefore, a systematic review of the literature is needed to identify, select and analyse scientific evidence to help in understanding the possibilities of implementing and evaluating phC in hospital units. The purpose is to make a critical analysis of existing literature to provide theoretical and practical support for the development of phC in patients.

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