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Review Article

A review of the provision of appropriate advice by pharmacy staff for self-medication in developing countries

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Abstract

Background: Patients in developing countries often prefer to self-medicate via community pharmacies. Pharmacy staff are therefore in a strategic position to optimize the health of the public by providing appropriate advice to patients who self-medicate.

Objective: To determine the proportion of pharmacy staff who provide appropriate advice when handling self-medication requests in developing countries.

Method: A literature search was undertaken via MEDLINE, EMBASE, CINAHL Plus, Web of Science and International Pharmaceutical Abstracts. Studies that reported on the proportion of pharmacy staff providing appropriate advice when handling self-medication requests in developing countries were included. The appropriateness of advice was determined by each author's definition in the original studies. Results: Twenty-eight studies met the inclusion criteria. There were variations in methods, scenarios, how the authors reported and defined appropriate advice, and study populations. The proportion of pharmacy staff providing appropriate advice varied widely from 0% to 96%, with a minority providing appropriate advice in 83% of the scenarios performed.

Conclusion: There was considerable variation in results, with the majority of studies reporting that inappropriate advice was provided by pharmacy staff when handling self-medication requests in developing countries. Consistent and robust methods are required to provide comparisons across practice settings. There is also a need to identify contributing factors to poor provision of advice for developing intervention strategies for practice improvement.

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Keywords: Self-medication; Developing country; Community pharmacy; Appropriate advice

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Introduction

Self-medication, defined as "the selection and use of medicines by individuals to treat selfrecognized illnesses or symptoms," is considered a core activity conducted by community pharmacies internationally. Providing pharmacy-based advice for self-medication requests is particularly important in developing countries for several reasons. First, due to poor economic situations and lack of universal health coverage, low income patients may not be able to afford professional medical consultations.^{2,3} Second, public health care facilities in developing countries are usually overburdened with patients resulting in prolonged waiting times to see a doctor. 4 Third, poor resourcing of public health care facilities can result in short supply of medications for patients.⁴⁻⁶ As a consequence, many patients in developing countries opt to self-medicate. They obtain their medication from community pharmacies because pharmacy staff provide free advice in addition to medicine supply.^{4,6}

The process of self-medication consultation in community pharmacies includes 2 main stages: patient assessment and the provision of advice. 7–10 During patient assessment, pharmacy staff need to gather and analyze patient information in order to choose the best treatment option for the patient. 8 Next, based on the assessment, the pharmacy staff need to provide advice on their treatment option. The treatment option may include providing medicines along with the associated medicine information, referring the patients to a doctor, providing non-pharmacological advice, or providing other advice that is relevant to patient's needs. 11

In 2013, an in-depth literature review was conducted to determine the rate of informationgathering and to understand the types of information that were gathered by community pharmacy staff in developing countries.¹² This review found that the rate of information-gathering varied widely from 18% to 97% across studies. Furthermore, the majority of studies showed that pharmacy staff did not gather an appropriate range of information that is in accordance with international standards. 12 The authors concluded that the information-gathering process for the provision of self-medication consultation via community pharmacies in developing countries was inconsistent and the majority of studies reported that the types of information gathered were not comprehensive. The authors recommended that there is a need to standardize the types of information reported in the original studies and to determine the barriers to appropriate information-gathering practice.

There is very little published evidence on the provision of advice for self-medication from community pharmacies. One review, which focused on the quality of pharmacy services in developing countries, indicated that there were shortcomings in professional practices for advice-giving. However, the review did not particularly focus on self-medication requests. Nor did it provide quantitative data to sufficiently understand the scale of the problem. Therefore, to complete a picture of self-medication consultation in community pharmacies in developing countries, this review aims to determine the proportion of pharmacy staff who provide appropriate advice.

Methods

Search strategy and screening of the literature

A literature search was undertaken via MED-LINE, EMBASE, CINAHL Plus, Web of Science and International Pharmaceutical Abstracts from 1990 to December 2013. The search terms for each database are presented in Appendix 1. 12 The search was limited to the English language and studies conducted on humans. Additional articles were also searched from citations in relevant papers and the lead author's personal collection.

The screening of studies consisted of 2 stages. The first stage was to apply 3 inclusion criteria, which were (1) studies that reported on the provision of advice for self-medication in community pharmacies, (2) studies that were conducted in developing countries as listed by the World Bank ¹⁴ and (3) studies that were original research. The second stage was to screen the results from the first stage for all cross-sectional studies that reported on the proportion of pharmacy staff providing appropriate advice when handling self-medication requests. Studies that met these inclusion criteria were reviewed (Fig. 1).

Operational definitions

For the purposes of our review, a community pharmacy was defined as "a medicine outlet that is authorized to sell prescription and nonprescription medicines and is registered by the relevant national authority as having a qualified

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