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## The use of non-prescription medicines during lactation: A qualitative study of community pharmacists' attitudes and perspectives

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### ABSTRACT

**Background:** Community pharmacists play a significant role in the provision of non-prescription medicines. There is evidence that women self-medicate and use non-prescription medicines whilst breastfeeding. Studies have demonstrated that breastfeeding women are likely to seek advice from pharmacists, presenting a unique opportunity for pharmacists to provide on-going support of these women especially in relation to the appropriate use of non-prescription medicines.

**Objectives:** This study aimed to explore community pharmacists' attitudes and perspectives towards the use of non-prescription medicines during breastfeeding.

**Methods:** This exploratory study was conducted through semi-structured interviews with 30 community pharmacists in Western Australia, between July and September 2013. Transcribed data were analysed using descriptive and qualitative approaches. NVivo<sup>®</sup> Version 10.0 was used to organise qualitative data and quotations to facilitate thematic analysis.

**Results:** Four major themes emerged. Despite the positive attitudes and favourable perceived knowledge level, participants often found themselves in a dilemma when required to make clinical recommendations especially in situations where there was a therapeutic need for treatment but clear guidelines or evidence to suggest safety of the medicines or treatment in lactation was absent. Despite the popularity of complementary medicines, participants felt more confident in providing advice in relation to conventional over complementary medicines. Whilst medication safety is within the field of expertise of pharmacists, the absence of information and safety data was seen as a major challenge and barrier to enable pharmacists to confidently provide evidence-based recommendations.

**Conclusions:** This study has enhanced our understanding of the attitudes and perspectives of community pharmacists towards the use of non-prescription, including complementary medicines, during breastfeeding. Future studies are warranted to confirm the safety of commonly used or requested medicines in breastfeeding. University training and continuing education for pharmacists should include the latest information available regarding the use of both conventional and complementary medicines throughout lactation.

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### 1. Introduction

Studies have shown that the majority of lactating women need to take at least one medicine whilst breastfeeding, either for acute or chronic medical conditions, or contraception.<sup>1–5</sup> Furthermore, there is also evidence that women have a tendency to self-medicate

and use both conventional and complementary medicines (CMs) available over-the-counter (OTC), during lactation.<sup>6–9</sup> Australian OTC medicines, also defined as non-prescription medicines, include Pharmacist Only Medicines (Schedule 3; medicines where pharmacists must have direct involvement in the supply), Pharmacy Medicine (Schedule 2; medicines which are only available for purchase in a pharmacy) and other non-scheduled products sold in the pharmacy.<sup>10,11</sup> Most CMs are available without prescription and, as with all other medicines, these could pose safety concerns for the breastfed infant because there is potential for constituents to be transferred to breast milk. Breastfeeding women therefore expect

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and rely on pharmacists to provide accurate and up-to-date information on whether a medicine, including a CM, is safe to use.<sup>12–14</sup>

Given the Australian National Health and Medical Research Council's recommendation for breastfeeding to continue for six to 12 months and beyond,<sup>15</sup> it is likely that lactating women will at some stage experience minor ailments, such as a headache, cough and cold, or musculoskeletal pain.<sup>16</sup> These minor ailments are associated with symptoms which may be treated or managed by OTC products. With the appropriate advice from pharmacists, some non-prescription medicines and medicinal products may assist in the management of these conditions, facilitating the well-being of the mother without unnecessary interruption to breastfeeding. For example, pharmacists are able to provide advice to breastfeeding women who wish to quit smoking with the aid of nicotine replacement therapy (NRT) by advising on the preferred option (short acting lozenges or gums, rather than long acting patches) and timing of NRT administration and feeding (maximise the time between dosing and feeding by taking a dose just after a feed).<sup>17</sup> Although there are several reference texts on the use and safety of medicines in breastfeeding, many of these references have inconclusive data on a large number of medicines due to the lack of studies and research.<sup>12,17,18</sup> Furthermore, there is a lack of documented information about the safety of CMs in breastfeeding, which often places women and health professionals in a dilemma as to whether a CM of the woman's choice should or should not be taken.

Community pharmacists are at the front line of healthcare service provision.<sup>19</sup> As primary healthcare professionals, pharmacists have frequent contact with breastfeeding women and their families. A study conducted in Queensland, Australia<sup>20</sup> showed that 78% of pharmacists reported seeing women with infants on a daily basis. Being regarded as medication experts and primary healthcare professionals, the public trusts community pharmacists for reliable and accurate information on the safety of medicines.<sup>12,21–23</sup>

Currently, limited information exists regarding health professionals' practices and knowledge of medicine use during breastfeeding.<sup>12,21</sup> In 2013, De Ponti et al.<sup>21</sup> published the first Australian study that investigated the perspectives of 176 community pharmacists on the use and safety of medicines in breastfeeding. The study was conducted using self-administered postal surveys and it had a greater focus on prescribed (metronidazole and lithium) and OTC conventional medicines (paracetamol and ibuprofen), with only one CM, St John's wort, mentioned in the questionnaire.<sup>21</sup> Participants' knowledge was tested as they were asked to comment on the safety of these five medicines in breastfeeding. Ninety-two percent of the participants responded they were confident to supply and counsel breastfeeding women on the use of these medicines. However, the study showed that despite pharmacists being confident and willing to discuss medication use with breastfeeding women, their knowledge in this area was variable.<sup>21</sup> Whilst the study by De Ponti et al. provided insight into pharmacists' knowledge and confidence in relation to the use of specific medicines during breastfeeding through a quantitative approach, it highlights the need to obtain an in-depth understanding of pharmacists' perspectives and attitudes, and the factors influencing them, in relation to the use of other non-prescription medicines. Previous studies have explored and investigated pharmacists' role, perspectives and attitudes towards the supply of non-prescription medicines in general.<sup>24–26</sup> However, to our knowledge, there is currently no published qualitative literature exploring community pharmacists' attitudes specifically towards the use of non-prescription medicines during breastfeeding.

This study aimed to explore Australian community pharmacists' attitudes and perceptions towards the use of non-prescription medicines during breastfeeding, their confidence and perceived

knowledge on this topic. The proposed study was conducted using a qualitative approach which enabled in-depth understanding of pharmacists' experiences and perspectives as well as the factors impacting on their attitudes towards the provision of evidence-based advice to breastfeeding women in relation to the use of non-prescription medicines.

## 2. Methods

The methods have been fully described previously.<sup>27</sup> Briefly, this exploratory study was approved by the Curtin University Human Research Ethics Committee (Approval number: PH-24-12) and conducted through semi-structured interviews with practising community pharmacists in Western Australia. A semi-structured interview guide was developed that comprised of a mix of closed and open-ended questions to gather information about pharmacists' perspectives and attitudes towards their role in facilitating the safe and effective use of non-prescription medicines during lactation, and supporting breastfeeding in the community. To explore pharmacists' self-awareness of knowledge level and to stimulate and encourage in-depth discussion about the topic, all participants were asked to indicate their responses to six statements related to topics associated with breastfeeding and the use of medicines. These six statements were read verbatim by the interviewer and participants were asked to indicate their level of agreement to each of the statements from the following options: strongly agree, agree, neither agree nor disagree, disagree, strongly disagree. The interview guide was developed based on thorough literature review and previous studies conducted by the research team, which identified a need for in-depth understanding of pharmacists' perspectives and attitudes, and the factors influencing them, specifically in relation to non-prescription medicines use during breastfeeding. Academic colleagues were asked to provide feedback on the interview guide where subsequent amendments were made, after which the guide was trialled on three pharmacists as part of the validation process. The interview guide comprised eight sections:

- Section A: Details and experience of pharmacist
- Section B: Principal place of practice
- Section C: Identifying needs
- Section D: Education and information-seeking behaviour
- Section E: Attitudes and confidence
- Section F: Knowledge
- Section G: Implementation of strategies
- Section H: Continuing professional development

This paper focuses on reporting the pharmacists' attitudes and confidence (Section E), knowledge (Section F), and the factors impacting on their attitudes and experience towards the provision of evidence-based advice to breastfeeding women in relation to the use of non-prescription medicines. These factors, presented as the themes, were not from a specific section of the interview guide, but emerged during interview data analysis. Other emerged themes, namely the needs and demand of breastfeeding women and their expectations of the roles of pharmacists in meeting their health needs, information-seeking behaviour, use of resources and aspects of the implementation of pharmacy-based public health services, are reported separately.<sup>27</sup>

### 2.1. Eligibility criteria and recruitment strategies

To be eligible for the study, participants had to be registered pharmacists with the Australian Health Practitioner Regulation Agency and practising in community pharmacies at the time of

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