

PHARMACISTS IMPROVING HEALTH CARE FOR ASTHMA

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The aim was to identify people who may be at risk of poorly controlled asthma and measure the impact of a specialised asthma management service (the Pharmacy Asthma Care Program, PACP). **Method:** A multi-site, randomised control-versus-intervention, repeated measures design was implemented in 50 pharmacies (24 control and 26 intervention) across 3 states. The PACP service for intervention patients involved a cycle of assessment, goal setting and monitoring over 6 months and followed the NAC 6-step Asthma Management plan. Over 3-4 visits, asthma severity, spirometry, inhaler technique, medications and lifestyle issues were reviewed and interventions delivered. Patients were referred to their physician for an action plan and other issues when required. Control patients were assessed for asthma severity and spirometry measures at 0 and 6 months, and received no interventions beyond standard patient care. Economic, clinical, and humanistic outcomes were used to evaluate the service. **Results:** A total of 351 patients (165 interventions and 186 controls) completed the study and 80% of these were referred to their physician at least once during the 6 month study. There were significant ($p < 0.05$) changes over time in the intervention patients compared to control patients. In the intervention patients there was a decrease in the proportion of those with severe asthma (88% to 53%); an increase in those classified as adherent to preventer medications (54% to 71%); a decrease in salbutamol use; improved quality of life; asthma knowledge; perceived control; correct inhaler technique (24% to 73%) and owning an action plan (23% to 64%). The estimated cost per QALY was \$791 indicating that this service is highly cost effective. **Conclusion:** Community pharmacists can identify people in need of better asthma care and contribute significantly to improving care and health outcomes for patients with asthma.

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