

PERSONALIZED ACADEMIC DETAILING

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Outline

- Define Academic Detailing (AD)
- Define Personalized Academic Detailing (PAD)
- Describe the PAD program in the Hamilton, McMaster & Stonechurch Family Health Teams

Academic Detailing

- Type of continuing education in which a trained healthcare professional meets with a healthcare professional in their practice setting to provide one-on-one evidence-based information with the intent of optimizing their practice
- 15-20 minute session
- Person delivering the information is not from the same practice site as the clinician
- Material is “generic”

O'Brien MA et al. Cochrane Database of Systematic Reviews 2007, Issue 4. Art No. CD000409. DOI:10.1002/14651858.CD000409.pub2

Benefits of Academic Detailing

- Positive effects in changing physician prescribing practices
- Positive patient outcomes
- Increased knowledge
- Evidence-based

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Personalized Academic Detailing

- Merge the role of the pharmacist (PHM) in primary care or Family Health Team (FHT) & the academic detailer

AD vs. PAD

Conventional AD	Personalized AD
Academic Detailer does not work directly with the clinician	Pharmacist works with the healthcare team
1-2 visits per year per topic	PHM work in the office at least once weekly. Professional relationship is more readily established
Academic Detailer provides evidence-based information that is generic, not patient specific	Evidence provided can be patient specific or generic
Answer Drug Information (DI) questions	Answer Drug Information (DI) questions
	Clinicians can refer pts to PHMs

PAD in Family Health Teams

- November 2007
 - 8 FHT PHMs trained in Academic Detailing
- January 2008 – Smoking Cessation (SC)
- February 2008
 - 8 PHMs trained in detailing SC to MDs & NPs
 - 63 MDs
 - 13 NPs
 - RxFiles handout

Key Messages

1. Refer patients to PHM for smoking cessation
2. Nicotine Oral Inhaler is available OTC
3. Combination therapy
 1. Bupropion + NRT
 2. Nicotine Patch + inhaler/gum
4. Nortriptyline can be used for smoking cessation
5. Caution use of Varenicline in patients with psychiatric disorders & monitor for mood changes

To date...

- 8 AD trained PHMs (5.8 FTE) detailed:
 - 51/63 MDs (81%)
 - 9/13 NPs (69%)
- Average time for 1 AD session = 19 minutes
- 106 referrals for smoking cessation

Anecdotal Feedback

- Handout, topic selection
- NPs take a bit longer than MDs
- Surprise (and relief?) from some MDs about referring pts to PHMs for consultation
- Rapid uptake of recommendations from PHMs
- High No-Show Rate
- Comments:
 - *“Thanks. This is great. I found the exercise very useful and motivating”*

Future Considerations

- Non-prescribers – RNs, RDs, social worker, etc
- Group presentations vs. One-on-One
- Steering committee – MDs, NPs, RNs, RDs, PHMs, other stakeholders?, etc
- MAINPRO-M1 Accreditation
- Quantitative Analysis? Surveys?
- Future topics

Summary

- Personalized Academic Detailing is potentially important in:
 - Providing evidence-based information to the clinicians and applying it to the patients
 - Building a relationship with the clinician
 - Changing prescribing practices
 - Providing a positive impact on the team

Questions?

