**Pharmaceutical Care – What Is It?**

Pharmaceutical care is a philosophy of pharmacy practice which requires that pharmacy shift its focus of work from products to patients. This philosophy recognizes that pharmacists have a variety of responsibilities, but emphasizes that the most important responsibility of the profession is the commitment to individual patients. This does not mean that the other responsibilities are not important. However, they must be placed in perspective, recognizing that the central role is the provision of care, specifically pharmaceutical care, to all patients in all pharmacy practice settings.

A vital component of this new philosophy is the movement away from a pharmacist-patient relationship where pharmacists decide what patients need to know. In the pharmaceutical care model, a pharmacist and patient work together in a cooperative, trusting manner to determine what the patient’s needs are and what care should be provided by the pharmacist in order to best meet these needs. This relationship is better described by examining Hepler and Strand’s formal definition of pharmaceutical care. It is “the responsible provision of drug therapy for the purpose of achieving definite outcomes which improve a patient’s quality of life.” Since the final goal of pharmaceutical care is to improve an individual patient’s quality of life, and since only the patient can determine this for himself/herself, a trusting pharmacist-patient relationship must be developed if pharmaceutical care is to be provided. Through this relationship, the pharmacist can work with the patient to determine if any drug-related needs exist which are preventing the patient from obtaining his/her desired quality of life. If any drug-related needs are identified, then it is the pharmacist’s responsibility to ensure that these drug-related needs are met.

In a similar fashion to medicine and medical problems, in the pharmaceutical care model of pharmacy practice drug-related needs are described as drug-related problems. Formally defined, drug-related problems are “any physical or psychological sign or symptom which is undesirable to the patient and which is in some way related to drug therapy”. Importantly a drug-related problem may be either an actual sign or symptom or a potential sign or symptom which is likely to develop if changes are not made in the patient’s drug therapy.

Although identifying all of a patient’s drug-related problems may sound like an overwhelming responsibility, there are only eight general ways in which drugs can cause problems in patients. A patient has a drug-related problem if the patient is experiencing, or has the potential to experience, an undesirable sign or symptom because he/she:

1. is taking a drug for no medically valid indication
2. needs a drug and one has no been prescribed or suggested
3. is taking the wrong drug or drug product
4. is taking to little of the right drug
5. is taking to much of the right drug
6. needs a drug, has been prescribed or suggested one, but is not actually taking it appropriately
is experiencing an adverse drug reaction
is experiencing a drug interaction

Up to this point in the pharmaceutical care process, patient, drug and disease information have been collected, in cooperation with the patient and other health care professionals, to allow the pharmacist to identify the patient’s drug-related problems. Beyond this, the pharmacist must continue to work with the patient to determine the priority of the various drug-related problems to be solved and to decide on the specific goals to be achieved when solving each drug-related problem. In addition, the pharmacist and patient must work with the patient’s physician(s) to develop a therapeutic plan which will attain these specific goals. Referring back to the formal definition of pharmaceutical care, the goals of this drug therapy are referred to as “definite outcomes which improve a patient’s quality of life”.

The next stage of pharmaceutical care requires that the pharmacist provide consistent follow-up to the patient and his/her physician, via a carefully designated monitoring plan, to ensure that the patient’s drug-related problem is being solved. This will require pharmacists to, for example, call patients at home at predetermined times, ask patients to telephone on specified dates and/or have patients return to the pharmacy at prearranged intervals. In addition, routine discussion with the patient’s physician may also be necessary. This follow-up is mandatory in order to ensure that the patient’s desired outcomes are being achieved.

Finally, this follow-up and all of the previous activities must be documented in a format which is both accessible to the pharmacist and ‘user friendly’. This is mandatory in order to:

- provide the pharmacist with a database for future patient visits and for communication with other pharmacists or health professionals, thereby ensuring continuity of patient care,

- provide evidence that the pharmacist has actually provided the care required to meet the patient’s drug-related needs and has thereby contributed towards achieving the patient’s outcomes.

This documentation is essential in today’s changing health care environment.

It is important to recognize that, while some of the components described above may seem familiar, the provision of one or more of these components does not meet the criteria for providing pharmaceutical care. For example, patient counselling is a tool which assists the delivery of pharmaceutical care. Patient counselling alone, although a valuable patient-oriented service, is not pharmaceutical care. Other activities such as drug information and pharmacokinetic monitoring, which are also worthwhile services and required to support the delivery of pharmaceutical care do not, unto themselves, constitute pharmaceutical care.
Pharmaceutical care represents a major change for the profession of pharmacy. By redefining and refocusing what pharmacists do, why they do it, how they do it and when they do it, it offers the profession a new, clear direction for the future. It is a vision which allows pharmacy to meet the many challenges it faces now and into the twenty-first century.


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