

IMPACT News



Project Goal:

- To improve patient outcomes by optimizing drug therapy through a community practice model that integrates pharmacists into family practices.

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DISCOVERING THE EXPERTISE OF THE FAMILY PHYSICIAN

I started working as a pharmacist with the Bruyère Family Medicine Centre one year ago, with the launch of the IMPACT project. Prior to this, I worked in community pharmacy practice where my contact with family physicians and other allied health professionals was limited. The experience of working in a primary care practice has given me an entirely new appreciation for the world of the family physician.

Physicians seem to have a unique way of creating a special relationship with each and every patient. They genuinely care for the well-being of their patients and are notably committed to patient advocacy. I have noticed that patients often speak of their physi-

cian with glowing respect and place a high value on their relationship with their physician.

I have also witnessed the challenges that physicians deal with on a daily basis including time constraints, patients with multiple problems and scarce resources. It appears to me that physicians have managed these challenges by working collaboratively with team members among a network of health care providers. I had not realized how tapped in physicians are to the community resources available to their patients.

I have discovered the efficiency with which physicians search for disease while attending regular meetings to discuss various pa-

tient related issues. Whereas pharmacists tend to be focused on one aspect of patient care, family physicians have developed a comprehensive and often holistic approach to health maintenance and the entire disease management process.

This experience has certainly been an eye-opener to discovering the expertise of the family physician, and I value the opportunity to work with such a compassionate and competent group of family physicians.

*Natalie Jonasson BScPhm,
Bruyère IMPACT site pharmacist*

IMPACT MODEL: MINISTRY APPROVES ENHANCED FUNDING FOR IMPACT

The Ontario Ministry of Health and Long-term Care have approved a proposal to enhance the funding to the IMPACT project. Keeping the pharmacists active in the practice sites will allow IMPACT to continue to collect outcome data on chronic conditions (hypertension, diabetes mellitus, hyperlipidemia) and determine the full benefit of the pharmacist integration after the working relationship has been established (e.g. patient outcomes after 1-2 years vs. 6 months). This extension will also allow for on-going evaluation and better understanding of the process integrating pharmacists into group family practices.

The funding will also help further develop the **IMPACT Pharmacist Training program** to increase capacity to



Teresa Pitre (left) of Apotex Inc. and CPhA President Garth McCutcheon (right) presented the IMPACT pharmacists with the CPhA Patient Care Achievement Award for Innovation at the CPhA conference, May 2005

provide pharmacists with the needed knowledge and skills to participate in integrated primary care practice models. The **creation of a practice innovation guide** will facilitate the system level integration of pharmacists and innovative

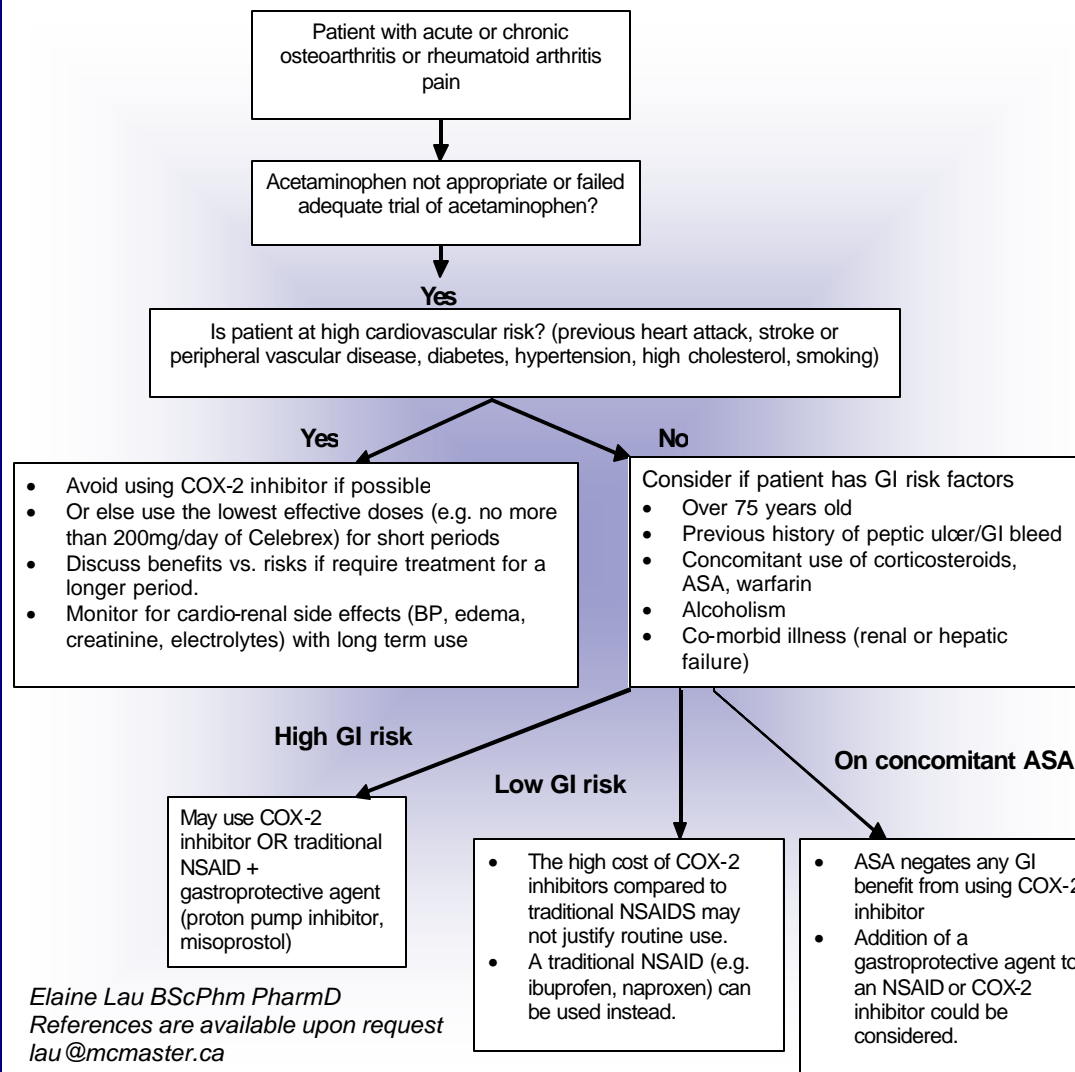
changes in medication use processes to optimize medication use.

Connie Sellors BScPhm



FAMILY PRACTICE TIPS: WHEN TO PRESCRIBE COX - 2 INHIBITORS

Studies show that COX-2 inhibitors are equal but not superior in efficacy to traditional NSAIDS. When deciding whether a COX-2 inhibitor should be prescribed, the patient's risks of GI complications and risks of heart disease should be assessed. The increased costs of COX-2 inhibitors relative to traditional NSAIDS need to be considered.



Summary of GI benefits with COX-2 inhibitors

- Only Vioxx has been shown to reduce GI complications (perforations, ulcers, bleeding) compared with traditional NSAIDs.
- Bextra, Celebrex, and Mobicox are not confirmed to protect against GI complications.
- All COX-2 inhibitors may have better GI tolerability (lower incidence of GI symptoms such as dyspepsia, abdominal pain, nausea and heartburn) than NSAIDs.

Summary of CV risks with COX-2 inhibitors

- All COX-2 inhibitors increase the risk of cardiovascular (CV) events. Risk varies by drug and dose.
- Vioxx 25mg/day increases the risk of CV events by 1.5% when given for 18 months in patients with colorectal adenomas and other patient populations.
- No conclusive evidence that other COX-2 inhibitors are more or less safe than Vioxx
- Bextra increases the risk of heart attack 3-fold when used for pain after coronary bypass surgery.
- Celebrex increases the risk of heart attack and stroke by 1.3% when high doses (400-800mg/day) are given for 2-3 years.

Elaine Lau BScPhm PharmD
References are available upon request
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MEET IMPACT PHARMACISTS LISA KWOK AND MARGARET JIN



Lisa Kwok BScPhm PharmD

Lisa graduated as a pharmacist from the University of Toronto in 1995. She completed her Pharm D in 2004. She has community

and hospital pharmacy working experience. Her hospital clinical specialties include geriatrics, cardiology and vascular/thoracic surgery. She has developed and implemented a smoking cessation program with publication in Pharmacy Post and InfoPharm Newsletter of the Ottawa hospital. Lisa will continue working at the Fairview IMPACT site in Toronto.



Margaret Jin BScPhm

Margaret graduated from the University of Toronto, Faculty of Pharmacy in 1998. Since graduation she

has worked providing pharmaceutical care to patients at the Ajax and Pickering Health Centre and as a nursing home consultant in Cobourg. She is a teaching associate for the Structured Practical Experience Program at the University of Toronto. She has experience as Director of Community Services for the Rotary Club of Northumber-

land Sunrise and as a member of the Board of Directors for the Pickering Health Centre Northumberland United Way. Margaret participated in a triathlon with her mentor Natalie Kennie in 2004. Margaret is leaving the project in June to further her studies in the Doctor of Pharmacy program at U of T.

SITE PROFILE: BEAMSVILLE MEDICAL CENTRE



The Beamsville Medical Centre (BMC) is located in Lincoln, a small town surrounded by orchards, vineyards, golf courses and close to beautiful Niagara Falls. The Centre has been computerized for twenty years, with computerized medical records for the past six years. The BMC supports a group of eight doctors, five Nurses, and a loyal and dedica-

ted staff of ten. One of the doctors has helped organize the Rural Residency Program that has encouraged medical students to work in under-serviced areas. Since 1992, the Centre has supervised medical students as well as doctors in post graduate training in family medicine training through McMaster and the Rural Ontario Medical Program. The doctors staff the local emergency room on a rotating basis at West Lincoln Memorial Hospital in Grimsby. The Centre is a Family Health Network and is applying to the Ministry of Health to become a Family Health Team (FHT). The BMC also includes a chiro-

practic clinic, a massage therapist, a dental clinic, two psychologists and a pharmacy. In the future, they hope to integrate these professionals along with a nurse practitioner, social worker, nutritionist and physiotherapist.



Niagara Falls

BUILDING COLLABORATIVE WORKING RELATIONSHIPS...

ABOUT THE CO-INVESTIGATORS



Michelle Howard BSc MSc

Michelle is a member of the Department of Family Medicine at McMaster University and is currently completing a PhD at McMaster in Health Research Methodology. She was a research coordinator with SMART and helped develop the IMPACT program and evaluation. Her research interests include medication use in older adults, community randomized trials, women's health and health services research. She has been working with the IMPACT measurement team on issues of data collection and planning for analyses.



Kelly Babcock BScPhm

Kelly graduated as a pharmacist from the Faculty of Pharmacy, University of Saskatchewan in 1981. Since graduation Kelly has held many leadership positions in hospital pharmacy practice. He is currently Director of Pharmacy at the SCO Health Service in Ottawa and Chair of the Professional Advisory Committee. Kelly has been awarded the Pharmacist of the Year in Saskatchewan, CSHP Ontario Branch Award and the Isabel E. Stauffer Meritorious Service Award. For the IMPACT project, Kelly has been instrumental in developing the pharmacist hiring process and providing support for our co-PI Barbara Farrell's involvement.



Elaine Lau BScPhm Pharm D

Elaine is a pharmacist who obtained her Bachelor of Pharmacy and Doctor of Pharmacy degrees from the Faculty of Pharmacy, University of Toronto. She joined the Centre for Evaluation of Medicines in August 2002 as a clinical research fellow with the TIPPS program and is completing coursework towards a Master's of Science degree in Health Research Methodology at McMaster University. She is currently a Clinical Care Coordinator with COMPETE III. Elaine's research interests include pharmacy practice research, evaluating barriers in the uptake of evidence-based clinical practice guidelines, appropriate prescribing in the elderly, and interventions to improve the education

ABOUT THE SITES....

The following are the **eight practice sites** participating in IMPACT from across Ontario:

- Beamsville Medical Centre
- Bruyère Family Medicine Centre
- Caroline Medical Group
- Fairview FHN
- Claire-Stewart Medical Centre (Mt. Forest)
- Riverside Court Medical Centre
- Stratford FHN
- Stonechurch FHN (new)

The practice sites were chosen to represent a diverse range of group family practices:

- Inner-city, urban, suburban and rural
- Electronic medical records and traditional paper charts
- Academic teaching site, community teaching sites, non-teaching sites

and delivery of therapeutic information to patients. Elaine's involvement with IMPACT has included development and implementation of the pharmacists' training and mentoring program as well as working with the IMPACT measurement team to evaluate the processes and outcomes of care of the pharmacists' intervention.

INVESTIGATORS & SUPPORTING INSTITUTIONS.....

Principal investigators:

Lisa Dolovich PharmD MSc
Kevin Pottie MD MCISC

Co-Principal Investigators

Barbara Farrell PharmD
Janusz Kaczorowski PhD

Co-Investigators

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Kelly Babcock BScPharm
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Carmel Martin MD PhD
Connie Sellors BScPhm
John Sellors MD MSc
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Gary Viner MD
Kirsten Woodend PhD
Christel Woodward PhD

Supporting Institutions

McMaster University,
Dept. of Family Medicine
University of Ottawa,
Dept. of Family Medicine
University of Toronto, Fac-
ulty of Pharmacy
Centre for the Evaluation of
Medicines, St. Joseph's
Health Care, Hamilton
Elisabeth Bruyère Re-
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Ottawa

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www.impactteam.info/

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AWARDS AND PUBLICATIONS

All seven IMPACT pharmacists were awarded the **Canadian Pharmacists' Association Patient Care Achievement Award for Innovation**. This award recognizes outstanding innovation in pharmacy practice aimed at improving patient outcomes. It was presented to the pharmacists at the annual

conference in Quebec City in May 2005.

Project Presentations have been made at the following venues:

- Canadian College of Clinical Pharmacists (CCCP) in Vancouver
- Canadian Association for

Population Therapeutics (CAPT) in Vancouver

- Canadian Pharmacists' Association Conference in Quebec City
- Research and Inquiry Day, and University of Ottawa and Ottawa City wide Grand Rounds

INTERNATIONAL NEWS

Brisbane, Australia: Sorensen L, Stokes J, Purdie D, Woodward M, Elliott R, Roberts M.. Medication Reviews in the community: results of a randomized controlled effectiveness trial. Br J Clin Pharmacol 2004; 58:6:648-664.

This study examined the effectiveness of a multidisciplinary service model delivering medication review to patients at risk of medication misadventure in the community. The multidisciplinary service model consisted

of GP education, patient home visits, pharmacist medication reviews, primary healthcare team conferences, GP implementation of action plans in consultation with patients and follow-up surgery visits for mo-



Brisbane Botanical Garden

onitoring. Effectiveness was assessed using the four clinical value compass domains of 1) functional status, 2) clinical outcomes, 3) satisfaction and 4) costs. The results showed that three of the four domains in the clinical value compass showed trends of improvement or were indeed improved in the relatively short follow-up period of the trial, suggesting that a service based on this model could achieve similar benefits in practice.

ABOUT OUR INTERSECTORIAL ADVISORY COMMITTEE...



Dr. Cheryl A. Levitt MBBCh CCFP FCFP

Dr. Levitt is a family physician and Chair of the Department of Family Medicine at McMaster University. She was born in South Africa, and received her medical training there. Dr. Levitt moved to Canada in 1977 and practiced rurally in British Columbia for several years. She is involved in family medicine leadership at a national, provincial, and local level with involvement in primary care. Dr. Levitt led the Primary Care Reform pilot project in Hamil-

ton where 120 family physicians joined Primary Care Network in 1999 – 2001. She set up the first academic Primary Care Network at McMaster University in 2001. She has been influential in advancing family practice in Hamilton, Ontario and Canada. Dr. Levitt has been a member of the SMART and now the IMPACT Advisory Committees and offers her significant expertise as a family physician, educator, and leader in primary care practice.



Dr. Wayne Hindmarsh BScPharm MSc PhD

Dean Hindmarsh is a pharmacist and is currently Dean and Professor of the Faculty of Pharmacy at the University of Toronto, a position he has held since August, 1998. He is the author of two books dealing with drug related topics - 1) "Drugs. What your Kid Should Know", and 2) "Too Cool for Drugs". He serves as a resource for Toxicology related questions locally and nationally. His expertise extends not just to Canada but

the United States, Mexico and the Caribbean countries. Dr. Hindmarsh holds numerous positions on University, Professional, Hospital, National, Departmental and Faculty Committees. Dean Hindmarsh joined the IMPACT Intersectorial Advisory Committee in 2003. He lends his broad experience to the development of this new practice model for pharmacists integrating into the primary care environment.