

Impact of a Perinatal Pharmacist on Community Prescribing and Patient Compliance

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Introduction

The perinatal MDT for Luton and Bedfordshire have identified a need for high quality and timely information regarding medication to be delivered to community prescribers and patients in the area.

In addition to increasing demands from perinatal patients to know more about the safety profile of their medication, the team have observed an increasing number of local GP and CMHT prescribers stopping patients' psychotropic medication unnecessarily during pregnancy, often resulting in a relapse of mental illness.

As a result of these observations, a pilot pharmacist post was implemented to help quantify and manage these trends.

Aim and Hypothesis

For a perinatal pharmacist to provide high quality, timely information on medication to community patients and prescribers, enabling them to make informed decisions regarding patient care.

The timely provision of high quality medicine information to local GPs and CMHTs will enable safe and effective prescribing during the perinatal period, reducing the risk of mental illness relapse. Similarly, the timely provision of high quality medicine information to patients will increase medication compliance during the perinatal period, reducing the risk of mental illness relapse.

Furthermore, diversifying the perinatal MDT with this expertise allows the perinatal consultant (the only doctor in the team and current point of contact for medicine information) time to undertake service development and quality improvement work alongside clinical commitments.

Method

A perinatal pharmacist targeted community prescribers in the area, as well as patients on the perinatal caseload. During the pilot period the pharmacist was available three days a week, culminating in thirty three days worked over a three month period.

Prescribers were targeted for the following reasons:

- If they reduced / stopped medication unnecessarily during pregnancy
 - If they had contacted the perinatal consultant / team asking for medication advice
- If they had several perinatal patients on their caseload

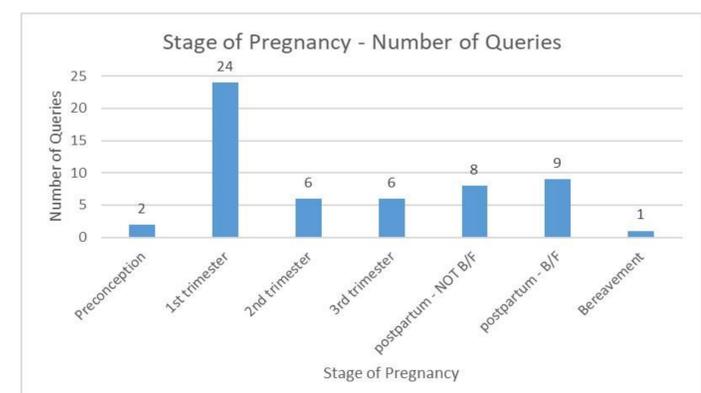
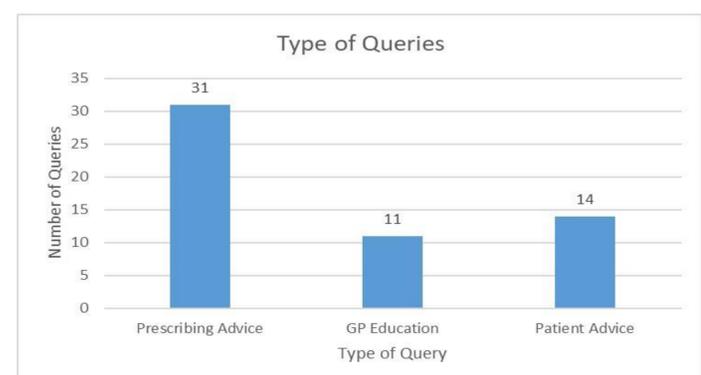
Patients were targeted for the following reasons:

- If they had expressed an interest in knowing more about their medications
 - If they had issues with their compliance
- If they were taking three or more regular psychotropic medications

Results

A total of 56 queries were completed during the pilot period. Of these 56 queries: 31 were requests for prescribing advice from GPs and CMHTs; 11 were recommendations to GPs to restart psychotropic medication that had been suddenly and inappropriately stopped; and 14 were from patients asking for more information on the safety profile of their medication.

The vast majority of queries concerned the prescribing and taking of medications within the first trimester and postpartum.



Conclusions

The large number of queries from both community prescribers and patients reflects the demand for high quality and timely medicine information observed by the perinatal MDT prior to the pilot. The provision of this information by the perinatal pharmacist has resulted in safer prescribing and improved medication compliance in Luton and Bedfordshire.

Inclusion of a perinatal pharmacist in the perinatal MDT has brought about other team benefits including medication teaching to the MDT and wider perinatal network, as well as allowing the limited consultant psychiatrist resource to be utilized across a broader range of activities. Due to the success of the pilot period, the post was ultimately financed for a year long period.

Acknowledgements + Contact

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For further discussion of this project, please contact
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