“PATIENT IS THE KING”, THE PERSPECTIVE AND VALUE OF PHARMACEUTICAL CARE

Ogbonna Brian Onyebuchi*

Department of Clinical Pharmacy and Pharmacy Management, Faculty of Pharmaceutical Sciences, Nnamdi Azikiwe University, PMB 5025 Awka, Nigeria.

ABSTRACT

Pharmaceutical care is the responsible provision of pharmacotherapy for the purpose of achieving definite outcomes which improves a patients’ quality of life. It optimizes patients’ health-related quality of life while achieving positive clinical outcomes within the ambient of realistic and minimal economic expenditures. This article pointed out the benefits of pharmaceutical care towards improving patients’ treatment outcomes and actualization of clinicians’ treatment goals and brings to the fore the importance attached to patients and the strategic position given to them in the entire care process. It recognizes the sovereignty of the patient and the critical roles they play and the strategic position they occupy in the health care value chain. All the activities and responsibilities taken by the pharmacist in carrying out pharmaceutical care is predominantly patient centered, patients utility and outcome targeted, in collaboration with other health care givers but having the patient as the sole object of interest at the heart and soul of the entire care process while observing the highest ethical standards in dealing with patients. Provisions are made for regular feedback and follow-up to effect necessary interventions timely. Pharmaceutical care recognizes patients as fundamentally key to all its operations and seeks to satisfy all patients drug therapy needs towards achieving treatment goals and improving patients’ quality of life.

Keywords: Pharmaceutical care, patients, pharmacists, quality of life, drug therapy problems, practice.
INTRODUCTION

Pharmaceutical Care; embracing quality control

Pharmacy practice is a dynamic process and has under gone both structural and systemic changes in terms of content, philosophy and practice in order to meet the ever increasing need and challenges of health care in a dynamic world. The practice of pharmaceutical care optimizes pharmacotherapy which in turn improves clinical, economic and humanistic outcomes with the ultimate aim of improving patients’ quality of life.[1] Medication errors seen in our hospitals daily cause more harm than anyone could imagine. Medical mistakes have been recognized as the third leading cause of death in the United States. An estimated 180,000 Medicare patients were reported to die annual from preventable adverse events by a United States Department of Health and Human Services in 2010 with consequent huge economic burden and social implications. Over 63,000 deaths are caused by medication errors in the United States, i.e. approximately, 5% of the annual hospitalization.[2] Pharmaceutical care with the view to eliminating this problem through taking care of patients’ drug needs, categorized drug therapy problems (DTP) into potential problems (problems in view which have not started manifesting) and actual problems (those which have started manifesting) and actively and systematically eliminates the problems.[3]

Pharmaceutical care sees the resolution of DTP as the heart and soul of the practice and seeks to resolve them more than anybody else could.[4] This is a quality assurance tool centered on patients with the aim to preventing unnecessary complications, death and improving patients’ quality of life. Pharmaceutical care has patient care as its core value and seeks to protect, defend and improve patients’ status. It is like the input-process-output-outcome procedure that improves quality. This study highlighted the benefits of pharmaceutical care towards improving patients’ treatment outcomes, actualization of clinicians’ treatment goals and brings to the fore the importance attached to patients in the entire care process.

Medication non-adherence

Medication non-adherence is defined as the number of doses of a medication not taken or incorrectly taken that jeopardizes patients’ therapeutic outcome.[5] Failure of patients to adhere strictly to their medication can lead to grievous consequences like treatment failure, development of resistance, increase in cost of treatment and decline in patients’ quality of life which could be associated with depression and loss of contact with reality. Patient education and counseling in pharmaceutical care encourages and empowers patients to take
responsibility in the pharmacotherapy process by promoting adherence measures. Medication education is further extended to patients’ care givers on patients’ disease state and their medications.\cite{6,7} Patients are assisted to develop short and long term goals targeted towards improving their treatment outcomes coupled with rewards for targets met. Special plans and follow-up are designed for special populations like the elderly, children and the chronically ill.\cite{8,9}

**Drug Therapy Problems**

Drug therapy problem is any undesirable event experienced by patients which involves or is suspected to involve drug therapy and actually or potentially interferes with a desired patient outcome.\cite{10} Whenever it is unresolved, it prevents the patient from deriving the optimum benefit from the treatment being given and could further compound the problems being treated. Pharmaceutical care confers on the pharmacists the skills to identify and resolve drug therapy problems by using relevant patients data, critical thinking and pharmacotherapy skills.\cite{11} Unresolved drug therapy problems predispose patients to adverse drug reactions, overdose, under dose, untreated indications, taking drugs unnecessary for present indication, drug interactions, loss of efficacy, development of resistance, inappropriate adherence, unnecessary drug therapy, incorrect administration and lots more. These ultimately endanger patients lives and disrupt the attainment of treatment goals and end points. Pharmaceutical care resolves these problems and places the patient on the road to attainment of desired therapeutic endpoints. The resolution of DTPs cut across all levels of care and takes care of patients’ immediate, medium and remote needs.\cite{12}

**Levels of care and disease state management**

Patients’ needs are determinants of pharmaceutical services since pharmaceutical care is applicable to all levels of patient care. However, the magnitude and complexity of operation varies with the complexity of patients need. It is required in the case of any patient using medicine. Some of these functions include but not limited to: screening for drug allergies, pharmacovigilance, conducting drug use evaluation, application of pharmaceutical principles for selected drug therapies, education of health care team members on rational drug use, selection of drugs of choice, selection of dosage forms, development and use of patients’ medication profile and drug therapy monitoring. Many studies abound on the positive impacts of pharmaceutical care on disease states like hypertension, diabetes, asthma, HIV/AIDS, and coronary heart disease with activities tailored towards meeting patients
needs. Results predominantly showed significant positive improvement on disease outcomes in patients receiving pharmaceutical care interventions when compared to controls or those receiving traditional care. Secondary pharmaceutical care is targeted towards patients with specialized need and those in need of acute care while the tertiary pharmaceutical care services covers patients on critical care. These groups requires advanced, complex and critical skills in tackling patients’ drug related needs.\textsuperscript{[13]} It is aimed at ensuring that all patients receive rational, cost effective and optimal care most suitable to achieving their treatment goals. It is preoccupied with taking responsibility for patients drug need while preserving and maintaining their well-being. The pharmacist determines and identifies the patients drug related needs and provides services through her skills and expertise to meet those needs more than anyone else could. Every operation is followed by proper documentation of patients’ information for follow-up and continuity of care. Data generated are used to further improve on services and patient care through research and development.

**Patient care**
The patient is the focal point in all pharmaceutical care operations and occupies a critical and strategic position and is treated as “The King”. Patients should not be seen as those on the receiving end but as custodians of vital information key to the resolution of not only their own needs but the need of others who might have similar problems subsequently. They are custodians of pivotal medical information on the merit of their disease state and status. They directly or indirectly participate in the entire health care process with autonomy which relates to their rights and privileges. These patients resources if properly harnessed could lead to positive outcomes and impact on the generality of the entire health care process. The value of the entire health care system will amount to nothing in the absence of patients. They are principally the purpose of existence of any hospital or health care delivery system. Health care organizations survive and grow by meeting patients need and members of the health care team can only be relevant in system when there are patients to be treated because, “Patient is The King”. They should be seen as reliable partners on the merit of information at their disposal and their experiences of the disease state in view.

**REFERENCES**


