

Process evaluation of a pharmacist-led intervention aimed at deprescribing and appropriate use of cardiometabolic medication among people with type 2 diabetes

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February 6, 2023

Abstract

Background: A quasi-experimental study investigated a pharmacist-led intervention aimed at deprescribing among patients with type 2 diabetes at risk of hypoglycaemia. Objective: To evaluate the process of implementing the intervention in primary care in order to understand variations in implementation and outcomes. Methods: Mixed-methods study based on the Grant-framework, with 10 domains, including recruitment of patients, delivery of the intervention, and response of pharmacists and patients. Data collected were: administrative logs, semi-structured observations of patient consultations (n=8), interviews with pharmacists (n=16), and patient-reported experience measure (PREM) questionnaires (n=66; response 73%). Results: Ninety patients from 14 pharmacies were included. Although the selection of patients based on high hypoglycaemia-risk was considered useful, pharmacists experienced barriers to proposing deprescribing in patients with recent medication changes, patients without current health problems or hypoglycaemic events, and patients treated in secondary care. The consultation aid and deprescribing tool provided were evaluated positively by the pharmacists. The majority of patients were satisfied with the service and information that the pharmacists provided. Conclusion: Pharmacists and patients were positive about the intervention. Both groups valued the consultation on deprescribing, supported by tools. To optimise the effect, improvements can be made to patient selection and local agreements on proactive deprescribing.

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