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ARE CONFIDENCE LEVELS OF HOSPITAL PHARMACISTS DIFFERENT FROM OTHER PHARMACISTS IN THE MANAGEMENT OF ANTICOAGULATION THERAPY? PRELIMINARY RESULTS FROM A MULTI-NATIONAL PHARMACISTS NEEDS ASSESSMENT SURVEY

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Background

The International Pharmacists for Anticoagulation Care Taskforce (iPACT) is an expert group committed to enhancing the key role that pharmacists play in anticoagulation management. Pharmacists are ideally suited to monitor patients in this therapeutic area, however, an assessment of their knowledge in providing consultations has not been formally evaluated.

Purpose

The purpose of this needs assessment survey is to identify self-reported gaps in competences and confidence among practicing pharmacists in the area of anticoagulation; to identify variances in confidence levels between community and hospital pharmacists; and to examine areas of anticoagulation with varying needs.

Material and methods

An electronic link to the needs assessment survey was distributed to the pharmacists in the participating countries via their respective professional organizations or colleges. Countries with adequate response rates included in the preliminary statistical analysis were Canada, France, Portugal, Croatia, Brazil, Ireland, Hungary, New Zealand, and the United Kingdom.

Results

A total of 1692 pharmacists completed the survey. The distribution of respondents were Canada 357(21.1%), France 304(18.0%), New Zealand 237(14.0%), Portugal 180(10.6%), Croatia 180(10.6%), Hungary 171(10.1%), Brazil 76(4.5%), Ireland 68(4.0%), and the United Kingdom 60(3.5%). Community pharmacists had the highest participation (759,44.9%) while outpatient hospital pharmacists, inpatient hospital pharmacists working on wards, and other practice sites represented 133(7.9%), 339(20.0%), and 461(27.2%) of the population, respectively. Overall, pharmacists were less confident in providing information on DOACs compared with VKA (83.4% versus 55.5%; $p < 0.0001$). Confidence level was similar when comparing pharmacists in the outpatient hospital setting with the remaining respondents (mean score=25.8 versus 25.5; $p > 0.005$) but significantly higher when comparing those pharmacists working on inpatient hospital wards (mean score=24.0 versus 26.0; $p < 0.001$). Inpatient hospital pharmacists also cited higher confidence when advising patients about VKA (92.3% versus 85.8%; $p = 0.002$). However, they did not show any difference in confidence when advising on NOACs (60.2% versus 61.0%; $p > 0.005$). More than 90% of pharmacists reported they would like additional education in anticoagulation with personalized e-learning as the preferred source.

Conclusion

These results highlight the apparent lack of confidence by both community and hospital pharmacists when discussing anticoagulation, particularly DOACs. Future continuing education programs should be developed on electronic platforms focusing on practical clinical themes that apply across all settings.

References and/or Acknowledgements

None

Keywords

anticoagulation
direct oral anticoagulants
continuing education
needs assessment