



## Pharmacy customers' views of potential brief alcohol intervention in community pharmacies

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## Outline

- New role for community pharmacists
- Research to date
- Link with complex interventions
- Pharmacy customers' views of BI
- Analysis and findings
- What have we learned?
- Current research
- Questions?



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## Recommendation for the role



•Community pharmacists should be involved in preventing and reducing harm from alcohol misuse.

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## What community pharmacists do already?

### •Public Health services:

- Smoking cessation
- Addiction service
  - Supervised consumption, needle exchange schemes
- Sexual health:
  - Chlamydia screening, emergency hormonal contraceptives

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## What community pharmacists do already?

### • National services:

- Medication Use Review (MUR), prescription intervention service
  - Prescribed and non-prescribed medications
  - Help patients understand their therapy and identify any problems



### • Local services:

- Cardiovascular risk assessment

- Alcohol BI service **not currently available** in pharmacies



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## How equipped for this role?

### NHS Community Pharmacy Contract:

- Outline of services provided in pharmacies
- Future developments and modernisation



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## How equipped for this role?

- Variety of locations
- Accessible service
- 12,000 pharmacies in the UK
- Approx 12 visits a year
- Large potential to influence public health



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## How equipped for this role?

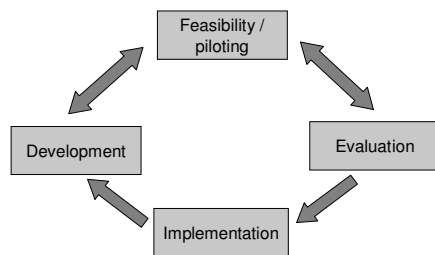


Confidential space, private discussion with pharmacist

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## How to develop pharmacy BI?

Medical Research Council provide a useful framework



Developing and evaluating complex interventions (MRC 2008)

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## Pharmacy alcohol BI research

**Development, Feasibility/piloting and Evaluation**

**Completed studies**

**Current studies**

**Early feasibility studies:**  
London (2004), Glasgow (2006), Leeds (2006) (UK)

Pharmacy customers' views (Westminster London, 2008)

Pharmacists' and customers' views (New Zealand, 2008)

Service feasibility:  
•30 sites  
•3 months  
•Economic evaluation (NHS Lambeth, London 2008 ongoing)

Pilot study:  
•8 test & 8 control sites (usual care)  
•Single contact vs. appointment based intervention (Hammersmith and Fulham, London)

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## Pharmacy alcohol BI research

•Early feasibility studies

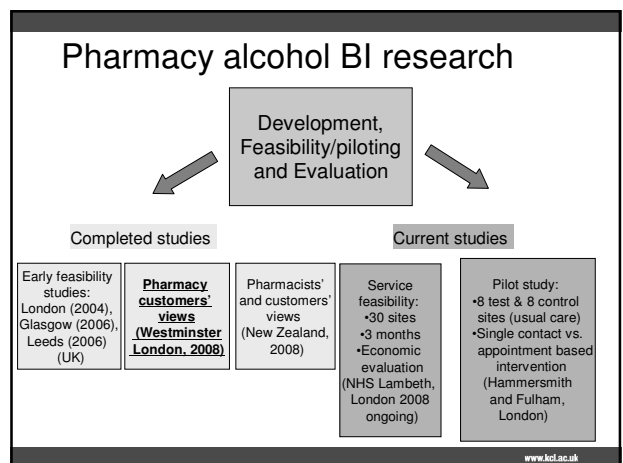
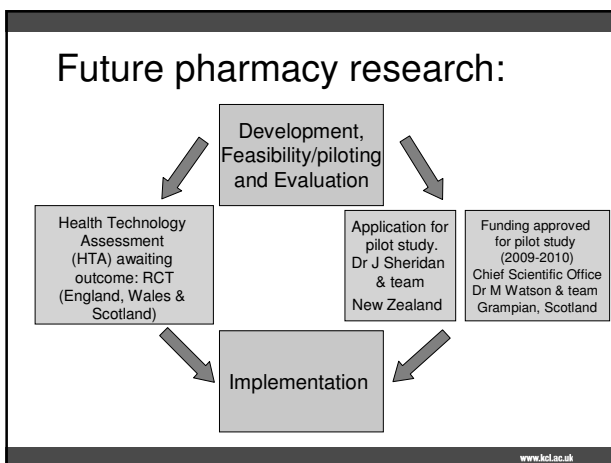
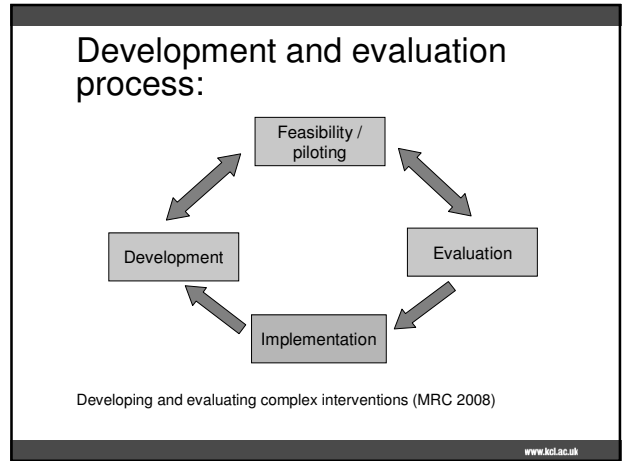
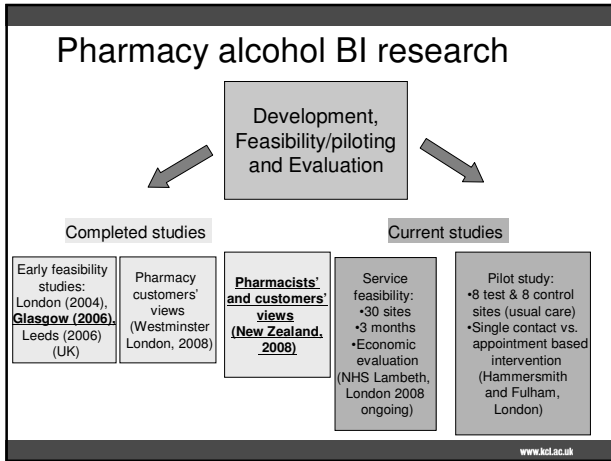
Study	Dhital 2004	Fitzgerald 2006	Goodall 2006
Location	London	Glasgow	Leeds
Customers recruited	73	70	352
Harmful / hazardous	26 (36%)	37 (53%)	105 (30%)
Follow up rate	40 (55%)	19 (27%)	Not specified
Change in drinking habits	12/40 drinkers appeared to reduce drinking (Drink Diaries)	7/11 drinkers appeared to reduce drinking (FAST scores)	Not reported
Pharmacists	1	8	5
Screening period (months)	3	4	3
Tool	AUDIT	FAST	FAST

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## Pharmacy alcohol BI research

- Small studies
- Lack randomisation
- However indicate BI could work in community pharmacies
- Perception & acceptability of participants (customers, pharmacists and pharmacy support staff)?

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## Aim to inform future studies

- Customers' views on a potential alcohol BI
- Reasons leading to participation
- Willingness to be assessed
- Conducted in Westminster PCT



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## Recruitment

- Purposive sampling:
  - Different locations
  - Two independent & two pharmacy multiple
  - Private consultation rooms
- As many customers as feasible interviewed:
  - Approached pharmacy counter
    - prescriptions, health advice, purchase medications
  - Conducted over 3-month period
    - Total 12 days recruiting customers
    - 9am till 5pm, weekdays

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## Design and rationale:

- Semi-structured interview
- Conducted within pharmacies
- Interview many as feasible:
  - Anonymous
  - Not tape recorded
  - Duration 5 to 10 minutes



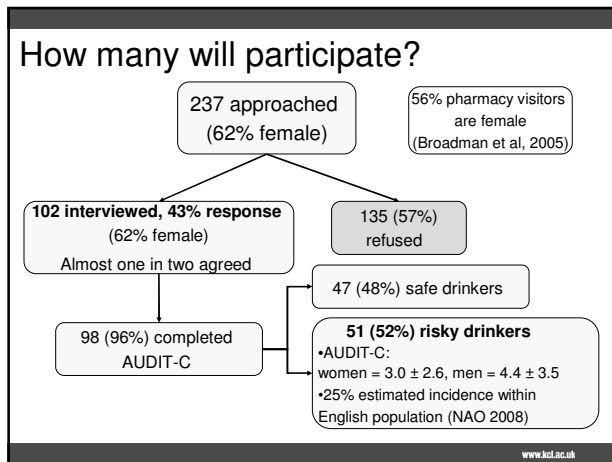
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## Interview of customers

### Interview schedule:

- Background of service:
  - 'Flashcards' prompts, AUDIT-C items, retrospective seven-day drink diary
- Alcohol screening and BI:
  - Willingness to discuss alcohol use and receive feedback?
  - Frequency of pharmacy visits
  - Demographics (age, gender, qualifications, work, ethnicity)
  - AUDIT-C :  $\geq 3$  (women) and  $\geq 4$  (men)
- Advantages and disadvantages of potential service?
  - 'what would lead you to take part or put you off?'

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### How many will participate?

Of the total interviewed (n= 102):

Willingness to participate: 'yes', 'not sure' or 'no'	Yes
Discuss alcohol use with pharmacist	97 (96%)
Accept written information	99 (98%)
Complete retrospective seven-day drink diary	95 (94%)
Attend follow up appointments	88 (87%)

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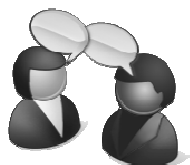
- ### Who are the risky drinkers?
- Verification needed
    - Larger study with representative sample
  - Factors to consider for future service:
    - **High proportion of risky drinkers** in sample (52%), compared to English norms (25%)
  - Frequency of visits (Chi<sup>2</sup>= 11.58, p= 0.021):
    - **Most frequent** visitors to pharmacies
      - Twice or more per week
    - **Least frequent** pharmacy visitors
      - Less than monthly
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- ### Who are the risky drinkers?
- Occupation:**
    - **Employed professionals**
    - **Non-paid** (e.g. unemployed, homemaker)
      - Rather than employed non-professionals or retired
      - (Chi<sup>2</sup>= 10.4, p= 0.015)
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## Why would customers use the service?

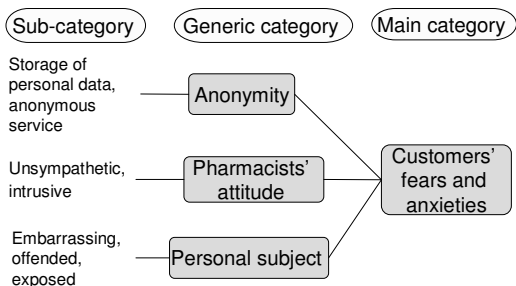
- Content analysis of open questions

- Customers' responses analysed inductively to derive categories grounded in the data



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## The abstraction process



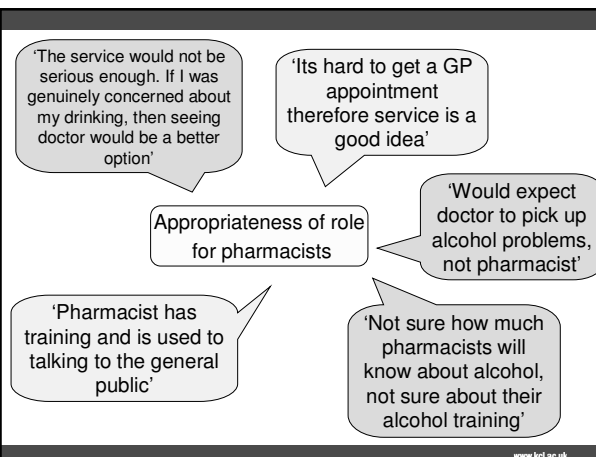
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## Main categories identified

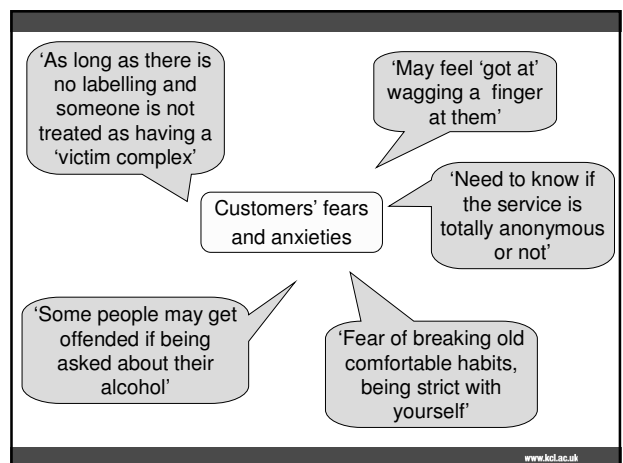
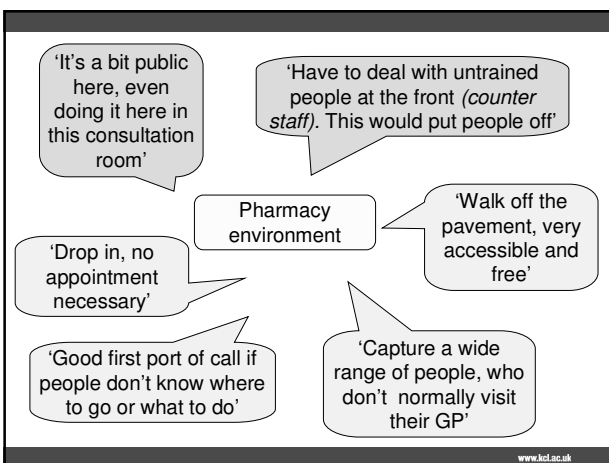
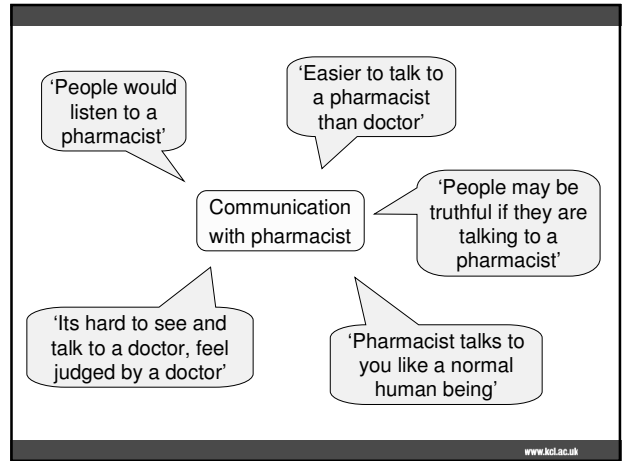
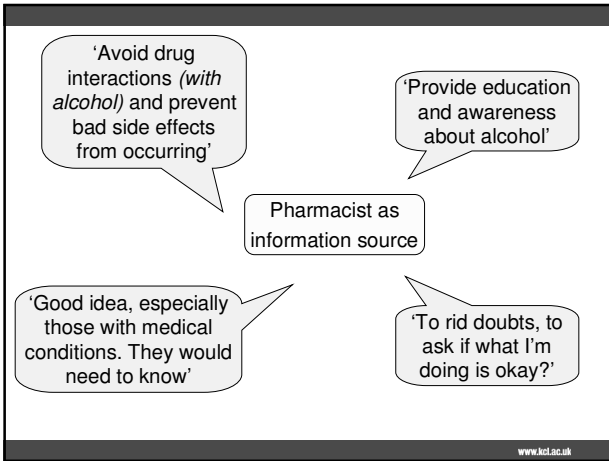
- **Five** main categories of customers' views of pharmacy BI service:

- Appropriateness of role for pharmacists
- Pharmacist as information source
- Communication with pharmacist
- Pharmacy environment
- Customers' fears and anxieties

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## What have we learned?

- BI in pharmacies **is feasible**
- Modern pharmacy environment: public health services
- Customers' positive about potential pharmacy BI
- Most willing to answer questions about their alcohol use with pharmacists
- Concerns about: anonymity, privacy, pharmacy environment and appropriateness of pharmacists' role

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## Current research

- Finalising ethics for Lambeth Pharmacy BI Project
  - Guys and St Thomas' Charity Trust's (GSTT)
  - New Services and Innovation in Healthcare
    - Not randomised
  - Due to commence Jan 2010
    - 30 sites
    - 3 months screening and BI
    - AUDIT-C & Drink Diary
- Hammersmith and Fulham, London pilot study
  - 8 test (screening and BI) & 8 control sites (information leaflet)
  - Single contact vs. appointment based intervention
- Outcomes to inform future studies

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## Acknowledgements

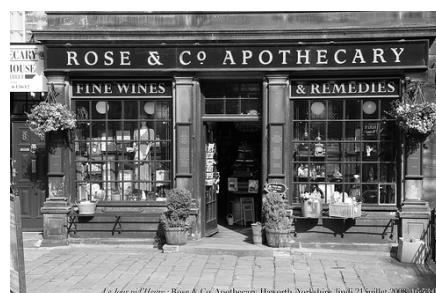
- Pharmacy customers and pharmacists in Westminster PCT

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## Questions?



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