



**International Pharmaceutical Federation
Fédération internationale pharmaceutique**

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FIP STATEMENT OF POLICY THE ROLE OF THE PHARMACIST IN THE PREVENTION AND TREATMENT OF CHRONIC DISEASE

Introduction

Without action, an estimated 388 million people will die from chronic diseases over the next ten years and this death rate is expected to increase. Further, 80% of these deaths will be in low and middle-income countries. The macroeconomic impact will be substantial.

Chronic diseases include cardiovascular disease, cancer, chronic respiratory diseases and diabetes. Common, modifiable risk factors underlie the major chronic diseases. These risk factors help to explain the vast majority of deaths from chronic disease, in men and women of all ages, and in all parts of the world. They include unhealthy diet, physical inactivity and tobacco use.¹

Given the fact that 80% of cardiovascular disease, and diabetes can be prevented by the elimination of risk factors, the solution would seem to lie largely in prevention. However, once a disease is identified, appropriate management becomes crucial. The following data from the USA are instructive. Diabetes affects 17 million people and is the fifth leading cause of death. Over half of the people in the USA with diabetes are not achieving control of their disease. This lack of disease management results in annual cost per patient of US\$13,200 compared to the non-diabetic patient cost of US\$2,500. The diabetic patient loses 8.3 working days each year compared to 1.7 for the non-diabetic.

As an international federation of organisations of pharmacists, it is the mission and responsibility of FIP to address issues that broadly affect health and well-being across the globe. Despite widespread assumption that the problem is one only of the developed world, chronic diseases are pandemic. The report by the World Health Organization (WHO), "Preventing Chronic Diseases: a vital investment" provides a background for FIP and its members to become actively involved in educating and advocating for the resolution of this issue.

Pharmacists are an essential part of the healthcare team, and any health programme should recognise that:

- Pharmacists are the most accessible health care professional in a community. As such, they are in a position to provide early detection of chronic diseases and to identify unhealthy life styles. They can help patients reduce risk factors by prevention counselling when appropriate, e.g., weight and diet management, exercise and smoking.

¹ WHO, "Preventing Chronic Diseases: A Vital Investment." 2005

- Pharmacists are a community based knowledge resource that can help people understand the dangers of chronic disease and the importance of prevention.
- Pharmacists work with other members of the healthcare team and can refer patients' chronic disease related issues to them.
- Many pharmacists are trained in physical assessment;

Against this background, FIP recognises that throughout the course of chronic disease management the pharmacist is an invaluable asset, especially considering that treatment of chronic diseases often requires the long-term use of medicines and, therefore, FIP recommends that the pharmacist practitioners continuously improve the quality of their practices in the areas of:

- Recognising the chronic diseases that are common in the community, or in a particular group within the community.
- Providing health screenings for such chronic diseases as hypercholesteremia, osteoporosis, diabetes and hypertension.
- Actively counselling on the appropriate use of medicines.
- Advocating lifestyle changes that can prevent a chronic disease and/or improve the outcomes of medicinal therapy.
- Providing pharmaceutical care² based on patients' needs by identifying and resolving problems associated with the use of medicines in chronic disease that if left unresolved will affect the outcomes. Inappropriate prescribing, dosing and directions, unnecessary poly-pharmacy, can all lead to patients making their own adjustments that can negatively affect the desired outcome.
- Working in teams with other healthcare professionals to optimise outcomes from medicines.
- Actively seeking to motivate and engage patients to accept the responsibility for their own health.

In order that the pharmacists can use their knowledge and skills effectively, the system in which they practise must recognise and include pharmacists as primary providers of health care. To help provide the necessary changes in the structure, FIP recommends that:

- Member Organisations use the results of demonstration projects to show the effectiveness of pharmacists in managing chronic diseases.
- Member Organisations work to incorporate the principles of the GPP³ into the design of new programmes for disease management by pharmacists.
- Member Organisations work to incorporate the concept of the “pharmacist of record⁴” into new programmes in their jurisdiction.
- Member Organisations work to establish communication systems within their countries, which serve to provide a flow of patient specific information among all relevant health care providers

² FIP Statement of Professional Standards: Pharmaceutical Care, 1998

³ The Tokyo Declaration (1993) Standards for Quality of Pharmacy Services (FIP Guidelines for Good Pharmacy Practice, September 1993) and revised version FIP/WHO GPP (1997)

⁴ “Pharmacist of Record” is the pharmacist chosen by the patient who will have the responsibility to identify and review all medicine use on an annual basis. The record of medicines should be available to and updated by, all healthcare providers directly involved with the care of the patient.

- Associations of pharmacists, with other health professions associations, should jointly seek methods for developing closer working relationships among the various health care practitioners.
- Providers and health systems should encourage patients with chronic disease to accept responsibility for the management of their own health problems. Health care plans should provide meaningful incentives to assure the acceptance of this personal responsibility
- National and local associations of pharmacists should work with national health programmes, patient organisations, managed care organisations or insurers to incorporate management by the pharmacist of medications for chronic diseases into the benefit design and to ensure pharmacists providing these services be fairly compensated.

And, FIP will work with other international organisations to ensure that effective prevention and management of chronic diseases by pharmacists is incorporated in national health programmes.