



Universiteit Utrecht



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Institute for
Pharmacy Practice
and Policy

Het CombiConsult van huisarts, praktijkverpleegkundige en openbaar apothekers voor patiënten met diabetes, CVRM en COPD



Het CombiConsult

GGG congres 2023
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Disclosure

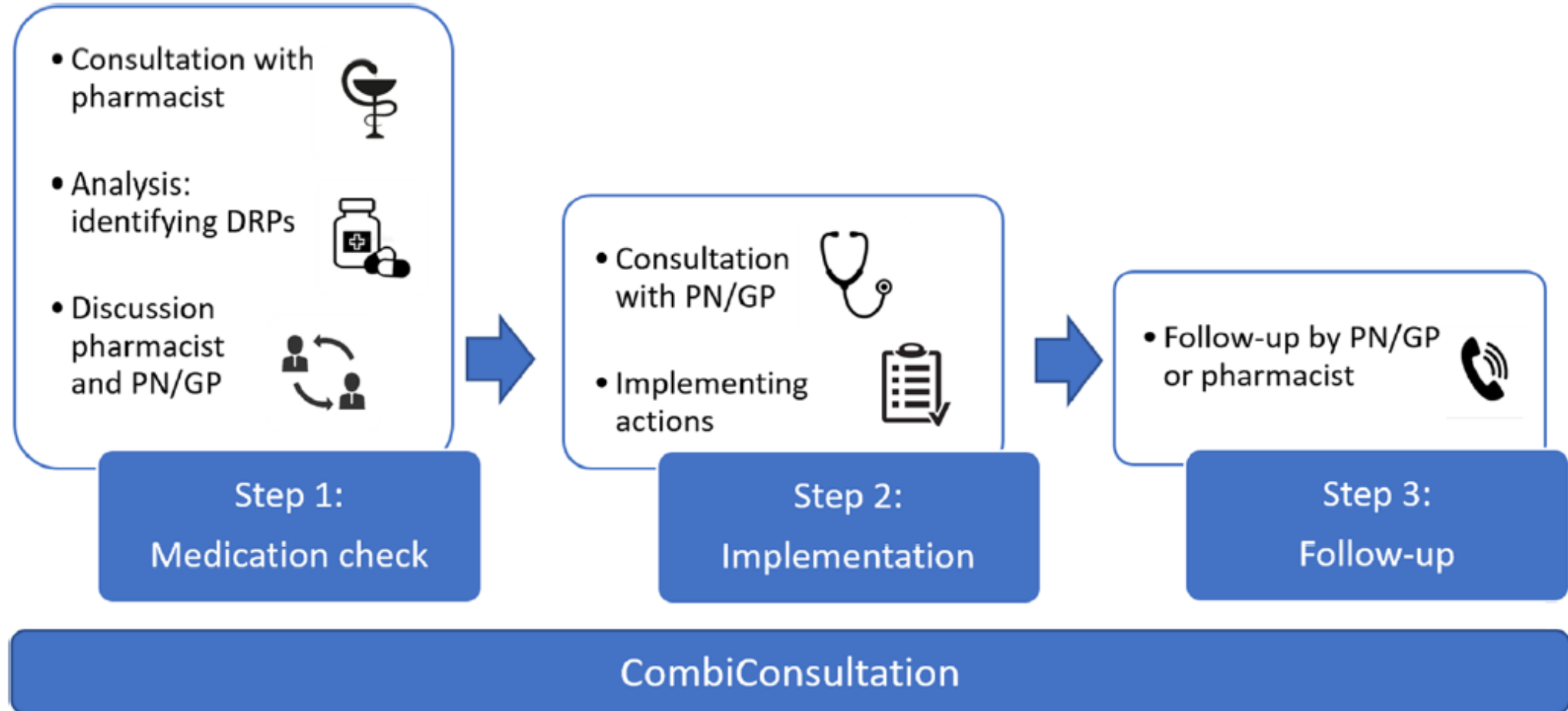
- Geen belangenverstrengeling

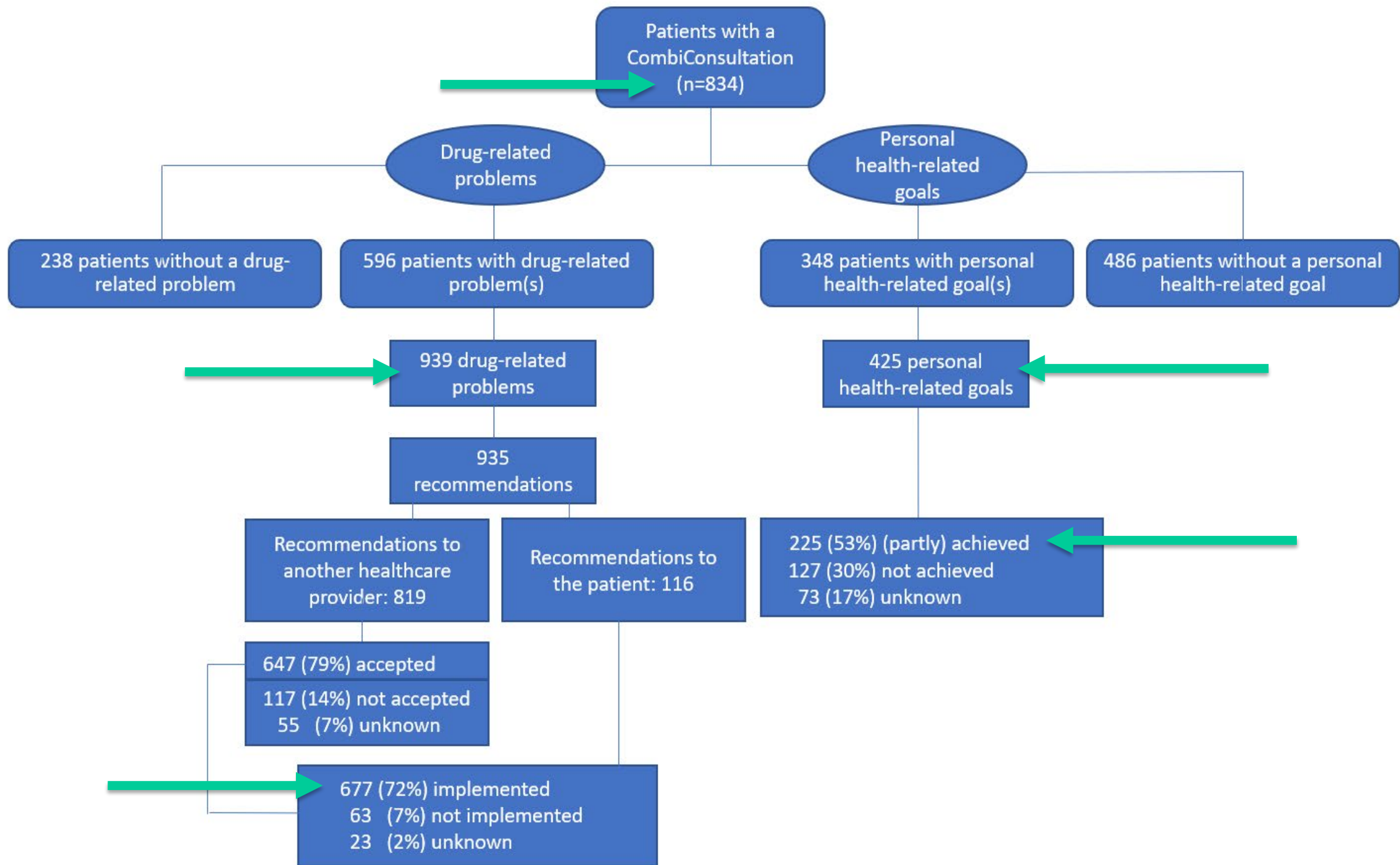
Inleiding

1. ...consult met de apotheker
2. ...voorafgaand of na (jaar)controle bij huisarts of PVK
3. ...primair gericht op medicatie voor chronische aandoening (COPD, hart- en vaatziekten, DM)
4. ...direct overleg huisarts / PVK en doorvoeren interventie i.o.m. patiënt



Het CombiConsult





FTPs en persoonlijke doelen

Drug-related problem type (N = 939)	Identified, n (%)
(Potential) adverse effect	311 (33%)
Undertreatment	169 (18%)
Overtreatment	146 (14%)
Medication not effective	65 (7%)
Useability problems	62 (7%)
Noncompliance	61 (6%)
Information/advice needed	41 (4%)
Additional monitoring required	22 (2%)
Incorrect dose	15 (2%)
Interaction/contraindication	12 (1%)
Other	35 (4%)
Total	939 (100%)

Type of personal health-related goal	n
Reduce number of drugs	84 (20%)
Improve/reach target laboratory values	48 (11%)
Reduce muscle complaints	42 (10%)
Reduce dizziness	32 (8%)
Reduce problems with diarrhoea or constipation	22 (5%)
Improve medication compliance	21 (5%)
Reduce practical problems with administration or intake of medication	20 (5%)
Reduce itching	17 (4%)
Reduce fatigue	14 (3%)
Reduce pain	13 (3%)
Other	112 (26%)
Total	425 (100%)

Type aanbevelingen

Type of recommendation	n	Accepted (%)	Not accepted (%)	Accepted status unknown (%)	Implemented (%)	Not implemented (%)	Implementation unknown (%)
Recommendation to another healthcare provider							
Dosage/usage change	242	189 (78%)	31 (13%)	22 (9%)	164 (68%)	18 (7%)	7 (3%)
Cessation of drug	189	146 (77%)	36 (19%)	4 (4%)	124 (66%)	18 (10%)	4 (2%)
Replacement of drug	136	104 (76%)	22 (16%)	10 (7%)	92 (68%)	11 (8%)	1 (1%)
Addition of drug	119	92 (77%)	17 (14%)	10 (8%)	83 (70%)	7 (6%)	2 (2%)
Performance of (laboratory) monitoring	91	76 (84%)	9 (10%)	6 (7%)	60 (66%)	8 (9%)	8 (9%)
Other	28	27 (96%)	1 (4%)	0 (0%)	26 (93%)	1 (4%)	0 (0%)
Start of a multidose drug dispensing system	8	8 (100%)	0 (0%)	0 (0%)	8 (100%)	0 (0%)	0 (0%)
Dosage form change	6	5 (83%)	1 (2%)	0 (0%)	4 (67%)	0 (0%)	1 (17%)
Total	819	647 (79%)	117 (14%)	55 (7%)	561 (68%)	63 (8%)	23 (3%)
Recommendation to the patient							
Provision of information/ advice	116	n/a	n/a	n/a	116 (100%)	0 (0%)	0 (0%)
Total	935*	n/a	n/a	n/a	677 (72%)	63 (7%)	23 (2%)

Man, 78 jaar

- Ervaart nachtmerries, denkt door gebruik pravastatine
- FTP: Niet therapietrouw. Gestopt met de pillen
- Doel: geen nachtmerries meer
- Tijdstip aangepast: 18:00 uur i.p.v. voor het slapen
 - Interventie: wijziging gebruik
- Doel behaald





Stelling 1

- Het CombiConsult is alleen zinvol bij patiënten met 5 of meer geneesmiddelen in gebruik
 - Juist
 - Onjuist

Stelling 2

- De praktijkverpleegkundige ziet geen toegevoegde waarde van de openbaar apotheker binnen de ketenzorg
 - Juist
 - Onjuist

CAPABILITY				
Behavioural Regulation and Memory, Attention and Decision Processes		PN	GP	CP
Facilitator	Reminders of the CombiConsultation during work	x	x	
Barrier	Daily routine tasks take precedence	x	x	x
Knowledge and Skills				
Facilitator	Sufficient pharmacotherapeutic knowledge of the pharmacist	x	x	x
Barrier	Insufficient consultation skills of the pharmacist		x	x
Barrier	Insufficient clinical reasoning skills of the pharmacist		x	
OPPORTUNITY				
Environmental Context and Resources		PN	GP	CP
Facilitator	The pharmacist's consultation room is in the general practice	x	x	x
Facilitator	The pharmacist has access to medical data	x	x	x
Facilitator	The healthcare providers have access to each other's agenda	x		x
Barrier	Dependence on each other's agenda for scheduling consecutive consultations	x	x	x
Barrier	Understaffed for scheduling consultations		x	x
Barrier	Lack of consultation room for the pharmacist in the general practice	x	x	
Social Influences				
Facilitator	A good existing collaboration between healthcare providers	x	x	x
Facilitator	Patients appreciate extra attention about their medication	x	x	
Barrier	Lack of alignment between PN and pharmacist regarding expectations of the CombiConsultation	x		
MOTIVATION				
Social/Professional Role and Identity		PN	GP	CP
Facilitator	The pharmacist's role is to answer questions about medication			x
Facilitator	The CombiConsultation improves the visibility of the pharmacist			x
Facilitator	The pharmacist is a partner of the GP, with their own expertise		x	
Optimism				
		PN	GP	CP



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Beliefs About Consequences		PN	GP	CP
Facilitator	An improved contact between the pharmacist and the GP/PN	x	x	x
Facilitator	The established relationship with the patient			x
Facilitator	The time saved compared to CMR			x
Facilitator	The interventions identified by the pharmacist improves the quality of care	x	x	x
Facilitator	The time saved for the PN during the periodic check-up	x		
Facilitator	Healthcare providers learn from each other	x	x	
Facilitator	The patients' acceptance of medication advice from the pharmacist	x		
Barrier	The selected patients do not all benefit from a CombiConsultation	x		x
Barrier	An extra healthcare provider (pharmacist) requires more coordination		x	
Barrier	The GP sometimes doubts the added value of the intervention proposals		x	
Reinforcement				
Facilitator	The CombiConsultation provides satisfaction	x		x
Barrier	The reimbursement of the consultations is insufficient		x	x
Intentions and Goals				
Facilitator	Healthcare providers desire the CombiConsultation to become routine in the future	x	x	x
Barrier	Difficulties in the continuation of the CombiConsultation in current daily practice			x
Emotion				
Facilitator	The CombiConsultation raises the PN to a higher level		x	
Facilitator	It is satisfying to get the patient on correct medication	x		
Facilitator	The pharmacist derives job satisfaction from contributing to the well-being of the patient			x



Impact en implementatie

- Het CombiConsult draagt bij aan het verbeteren van de farmacotherapeutische zorg van de patiënt
- Voor de uitvoering van het CombiConsult is een goede werkrelatie tussen openbaar apotheker en huisarts vereist
- Het CombiConsult kan bijdragen aan de acceptatie van de professionele rol van de apotheker
- Om het CombiConsult optimaal te kunnen uitvoeren, dienen apothekers hun vaardigheden in consultvoering en klinisch redeneren te verbeteren
- Vergoeding is essentieel voor een brede invoering van het CombiConsult

Bedankt voor de aandacht!

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