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Is there a difference in pharmacist confidence levels with DOACs versus traditional anticoagulation therapy? Preliminary results from a multinational pharmacist needs assessment survey

Presenting Author:

John Papastergiou, BSc, BScPhm. (insert biography and email)

Authors:

J. Papastergiou*^{1,2,3}, F. De Rango³, A. Rizwan¹, M. Lelievre¹, F. Alves da Costa⁴, S. Antoniou⁵, S. Steurbaut⁶, S. Rydant⁷, B. van den Bermt⁸, N. Kheir⁹ and International Pharmacist Anticoagulation Care Taskforce (iPACT)

¹Leslie Dan Faculty of Pharmacy, University of Toronto, Toronto, ²School of Pharmacy, University of Waterloo, Kitchener, ³Pharmacy, Shoppers Drug Mart, Toronto, Canada, ⁴Cooperativa de Ensino Superior Egas Moniz, Instituto Superior de Ciências da Saúde Egas Moniz, Caparica, Portugal, ⁵Cardiovascular Medicine, Barts Health NHS Trust, London, United Kingdom, ⁶Department of Clinical Pharmacology and Clinical Pharmacy, Free University of Brussels, Brussels, ⁷Royal Antwerp Association of Pharmacists (KAVA), Antwerpen, Belgium, ⁸Pharmacy, SintMaartenskliniek, Nijmegen, Netherlands, ⁹College of Pharmacy, Qatar University, Doha, Qatar

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Objectives:

The International Pharmacists for Anticoagulation Care Taskforce (iPACT) is an expert group committed to enhancing the key role that pharmacists play in anticoagulation management. Despite the important role for pharmacists in this therapeutic area, an assessment of their knowledge in providing consultations has not been formally evaluated. The purpose of this needs assessment survey is to identify self-reported gaps in confidence among practicing pharmacists in the area of anticoagulation internationally and to identify variances in confidence levels between traditional and novel therapies.

Methods:

An electronic link to the needs assessment survey was distributed to pharmacists in the participating countries via their respective professional organizations or colleges.

Results:

3680 pharmacists from fourteen countries completed the survey. The distribution of respondents were Belgium (11.1%), Canada (9.7%), Czech Republic (6.4%), The United Kingdom (4.8%), Netherlands (3.2%), France (8.3%), Hungary (6.2%), Spain (7.7%), Brazil (14.1%), Portugal (4.9%), Croatia (4.9%), New Zealand (6.5%), Argentina (3.6%), and Slovenia (8.6%). Pharmacists were significantly less confident providing necessary information on DOACs versus VKAs (48.6% versus 75.8%; $p < 0.0001$). In terms of DOACs, pharmacists from the Netherlands, Canada, UK, and New Zealand were the most confident (range 71.6-78.8%). All remaining countries had a confidence of <70% (range 21.6-63.0%). Notably, 51.4% of pharmacists reported not being confident in providing necessary information on DOACs. Pharmacists cited the most confidence discussing benefits of anticoagulation (84.8%), indications (79.1%) and adverse effects (75.7%). They were least confident with anticoagulant bridging/switching (28.2%), monitoring INR (37.3%), managing bleeds (44.7%), missed doses (49.1%), and interactions (60.8%). Most pharmacists (91.6%) reported they would like additional education, with a preference for e-learning (65.0%).

Conclusions:

These results suggest a lack of pharmacist confidence in providing information on anticoagulation therapy, particularly DOACs. Ideally, future continuing education programs should focus on practical clinical themes including management of bleeding, adverse events, and bridging between agents. E-learning appears to be the preferred educational platform.

Disclosure of Interest: None Declared

