



PRESS RELEASE:

Initiative to reduce medication-related harm a success

5th of September 2021

Patients at Main Street Medical Centre Merimbula have reduced their chances of medication misadventure and saved thousands of dollars thanks to their 'Pharmacist in General Practice' initiative.

The initiative has seen a Pharmacist working in the General Practice for the past two years, helping ensure patients understand their medications and offering medication reviews for patients recently discharged from hospital.

Pharmacist Halley Sharpe says conducting medication reviews and improving the health literacy of patients reduces medication-related harm.

"In older Australians, there is an increased frequency of multiple health conditions and multiple medication use," she said. "Since medications are now prescribed by active ingredient, rather than brand name, a lot of patients don't understand what they're taking and why."

The objectives of the project was to support General Practice by identifying opportunities to deprescribe, decreasing the number of patients using Schedule 8 medications for non-cancer pain, and improving the continuity of care beyond hospital discharge.

Polypharmacy increases the risk of medication misadventure, which accounts for 250,000 hospital admissions annually. Studies by the Pharmaceutical Society of Australia (PSA) have suggested that 50% of this harm is preventable.

"During the project, we found that 73% of our patients involved in a comprehensive medication review had recommendations to deprescribe."

Mrs. Sharpe says deprescription is not only beneficial to health outcomes but also has financial benefits for both patients and the government.

"Through deprescription of unnecessary or harmful medications, the cost saving to patients involved in this project was calculated to be \$5,595.45 annually."

"The calculated PBS savings to the government upon acted requests to deprescribe was \$11,245.24 per annum."

Studies by the PSA have suggested that hospital admissions due to medication-related problems cost the national health care budget \$1.4 billion annually.

"Our project found that the estimated ED presentation and hospital admission cost of possible medication misadventure potentially prevented by pharmaceutical intervention came to \$372,674 over the course of two years."

Pharmaceutical intervention for patients who have recently been discharged from hospital was made possible by liaising with GPs and accessing patient records via Main Street Medical Centre.



Principal GP Dr. Nick Theris says the 'Pharmacist in General Practice' Project has important implications for rural medicine and General Practice nationwide.

"There has been a chronic shortage of GPs in South East NSW, meaning there is an enhanced role for allied health professionals to support General Practice."

"The benefits to community health resulting from this project suggests that Workforce Incentive Program (WIP) funding for General Practices should be extended to include pharmacy."

"Given the success of the 'Pharmacist in General Practice' project, we would love to see these strategies implemented nationally."

This initiative was funded through the Primary Health Network.

MEDIA CONTACTS

Mrs. Halley Sharpe

E: pharmacist@merimbuladoctors.com

Dr. Nick Theris

E: nick.theris@merimbuladoctors.com